	WINDHAM COMMUNITY MEMO	ORIAL HOSPITAL	_				
	TWELVE MONTHS ACTU	JAL FILING					
	FISCAL YEAR	2012					
	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION						
(1)	(2)	(3) FY 2011	(4) FY 2012	(5) AMOUNT	(6) %		
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE		
I.	ASSETS						
A.	Current Assets:						
	Cash and Cash Equivalents	\$2,502,682	\$4,122,969	\$1,620,287	65%		
	Short Term Investments	\$0	\$0	\$0	0%		
	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$14,881,466	\$20,670,040	\$5,788,574	39%		
	Current Assets Whose Use is Limited for Current Liabilities	\$762,364	\$654,986	(\$107,378)	-14%		
	Due From Affiliates	\$170,422	\$715,820	\$545,398	320%		
		\$170,422	\$7 15,620	\$045,398	0%		
	Due From Third Party Payers  Inventories of Supplies	\$1,113,332	\$1,105,978	(\$7,354)	-1%		
	Prepaid Expenses	\$839,664	\$1,103,978	(\$692,076)	-82%		
	Other Current Assets			( , , ,			
9	Total Current Assets	\$1,506,027 <b>\$21,775,957</b>	\$3,680,517 <b>\$31,097,898</b>	\$2,174,490 <b>\$9,321,941</b>	144% <b>43%</b>		
	Total Guilent Assets	Ψ21,113,931	ψ31,031,030	ψ3,321,341	45 /6		
В.	Noncurrent Assets Whose Use is Limited:						
1	Held by Trustee	\$2,505,394	\$2,831,893	\$326,499	13%		
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%		
3	Funds Held in Escrow	\$1,439,934	\$1,439,934	\$0	0%		
4	Other Noncurrent Assets Whose Use is Limited	\$1,477,742	\$1,597,574	\$119,832	8%		
	Total Noncurrent Assets Whose Use is Limited:	\$5,423,070	\$5,869,401	\$446,331	8%		
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%		
6	Long Term Investments	\$325,966	\$406,468	\$80,502	25%		
7	Other Noncurrent Assets	\$2,036,739	\$3,123,242	\$1,086,503	53%		
C.	Net Fixed Assets:						
1	Property, Plant and Equipment	\$101,775,114	\$104,401,288	\$2,626,174	3%		
2	Less: Accumulated Depreciation	\$66,982,063	\$70,034,957	\$3,052,894	5%		
	Property, Plant and Equipment, Net	\$34,793,051	\$34,366,331	(\$426,720)	-1%		
3	Construction in Progress	\$2,014,711	\$5,279,793	\$3,265,082	162%		
	Total Net Fixed Assets	\$36,807,762	\$39,646,124	\$2,838,362	8%		
	Total Assets	\$66,369,494	\$80,143,133	\$13,773,639	21%		
		ψου,συσ,τσ4	ψου, ιπο, ισο	ψ10,110,003	£1 /0		

	WINDHAM COMMUNIT	TY MEMORIAL HOSPITAL					
	TWELVE MONTI	HS ACTUAL FILING					
	FISCAL YEAR 2012						
	REPORT 100 - HOSPITAL BA	ALANCE SHEET INFORM	ATION				
(1)	(2)	(3)	(4)	(5)	(6)		
LINE	E DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE		
	<u> </u>	71010712	71010712	DIFFERENCE	DITTERCITOE		
II.	LIABILITIES AND NET ASSETS						
Α.	Current Liabilities:						
1	Accounts Payable and Accrued Expenses	\$5,823,590	\$10,158,204	\$4,334,614	74%		
2	Salaries, Wages and Payroll Taxes	\$813,367	\$1,194,930	\$381,563	47%		
3	Due To Third Party Payers	\$71,283	\$1,499,004	\$1,427,721	2003%		
4	Due To Affiliates	\$0	\$0	\$0	0%		
5	Current Portion of Long Term Debt	\$3,406,605	\$11,163,890	\$7,757,285	228%		
6	Current Portion of Notes Payable	\$367,375	\$173,906	(\$193,469)	-53%		
7	Other Current Liabilities	\$6,135,012	\$8,955,163	\$2,820,151	46%		
	Total Current Liabilities	\$16,617,232	\$33,145,097	\$16,527,865	99%		
В.	Long Term Debt:						
1	Bonds Payable (Net of Current Portion)	\$19,388,119	\$19,376,083	(\$12,036)	0%		
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%		
	Total Long Term Debt	\$19,388,119	\$19,376,083	(\$12,036)	0%		
3	Accrued Pension Liability	\$56,931,181	\$64,662,899	\$7,731,718	14%		
4	Other Long Term Liabilities	\$4,482,535	\$5,482,001	\$999,466	22%		
	Total Long Term Liabilities	\$80,801,835	\$89,520,983	\$8,719,148	11%		
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%		
		ΨΟ	ΨΟ	ΨΟ	0 70		
C.	Net Assets:	(20-0-0-04-0)	(0.4= 0.40, 400)	(0.11.00=.000)			
1	Unrestricted Net Assets or Equity	(\$35,978,450)	(\$47,943,489)	(\$11,965,039)	33%		
2	Temporarily Restricted Net Assets	\$1,318,536	\$1,453,029	\$134,493	10%		
3	Permanently Restricted Net Assets  Total Net Assets	\$3,610,341	\$3,967,513	\$357,172	10%		
	Total Net Assets	(\$31,049,573)	(\$42,522,947)	(\$11,473,374)	37%		
	Total Liabilities and Net Assets	\$66,369,494	\$80,143,133	\$13,773,639	21%		

	WINDHAM COMMUNIT	Y MEMORIAL HOSP	PITAL				
	TWELVE MONTH	IS ACTUAL FILING					
		L YEAR 2012					
	REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION						
(1)	(2)	(3) FY 2011	(4) FY 2012	(5) AMOUNT	(6) %		
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE		
A.	Operating Revenue:						
1	Total Gross Patient Revenue	\$199,383,125	\$210,150,089	\$10,766,964	5%		
2	Less: Allowances	\$110,493,786	\$116,283,387	\$5,789,601	5%		
3	Less: Charity Care	\$3,033,891	\$3,706,321	\$672,430	22%		
4	Less: Other Deductions	\$0	\$0	\$0	0%		
	Total Net Patient Revenue	\$85,855,448	\$90,160,381	\$4,304,933	5%		
5	Other Operating Revenue	\$3,044,239	\$5,761,698	\$2,717,459	89%		
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%		
	Total Operating Revenue	\$88,899,687	\$95,922,079	\$7,022,392	8%		
В.	Operating Expenses:						
1	Salaries and Wages	\$41,345,796	\$42,907,325	\$1,561,529	4%		
2	Fringe Benefits	\$16,084,939	\$15,336,446	(\$748,493)	-5%		
3	Physicians Fees	\$693,799	\$930,637	\$236,838	34%		
4	Supplies and Drugs	\$7,777,841	\$7,642,658	(\$135,183)	-2%		
5	Depreciation and Amortization	\$4,545,850	\$4,147,105	(\$398,745)	-9%		
6	Bad Debts	\$3,365,182	\$3,839,277	\$474,095	14%		
7	Interest	\$1,476,666	\$1,325,543	(\$151,123)	-10%		
8	Malpractice	\$609,350	\$659,252	\$49,902	8%		
9	Other Operating Expenses	\$16,740,066	\$19,661,874	\$2,921,808	17%		
	Total Operating Expenses	\$92,639,489	\$96,450,117	\$3,810,628	4%		
	Income/(Loss) From Operations	(\$3,739,802)	(\$528,038)	\$3,211,764	-86%		
C.	Non-Operating Revenue:						
1	Income from Investments	(\$16,806)	(\$163)	\$16,643	-99%		
2	Gifts, Contributions and Donations	\$265,347	\$698,728	\$433,381	163%		
3	Other Non-Operating Gains/(Losses)	(\$561,377)	(\$936,114)	(\$374,737)	67%		
	Total Non-Operating Revenue	(\$312,836)	(\$237,549)	\$75,287	-24%		
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$4,052,638)	(\$765,587)	\$3,287,051	-81%		
	Other Adjustments:						
	Unrealized Gains/(Losses)	(\$10,172)	\$52,251	\$62,423	-614%		
	All Other Adjustments	\$0	\$0	\$0	0%		
	Total Other Adjustments	(\$10,172)	\$52,251	\$62,423	-614%		
	Excess/(Deficiency) of Revenue Over Expenses	(\$4,062,810)	(\$713,336)	\$3,349,474	-82%		
	Principal Payments	\$19,866,618	\$5,571,922	(\$14,294,696)	-72%		

#### REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
.,	ν=/	FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	CROSS DEVENUE DV DAVED				
I.	GROSS REVENUE BY PAYER				
Α.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$38,366,754	\$37,135,345	(\$1,231,409)	-3%
2	MEDICARE MANAGED CARE	\$5,467,650	\$6,084,216	\$616,566	11%
3	MEDICAID	\$7,584,999	\$9,570,502	\$1,985,503	26%
4	MEDICAID MANAGED CARE	\$3,679,039	\$693,574	(\$2,985,465)	-81%
5	CHAMPUS/TRICARE	\$117,471	\$211,837	\$94,366	80%
6	COMMERCIAL INSURANCE	\$15,501,339	\$14,076,588	(\$1,424,751)	-9%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
9	WORKER'S COMPENSATION SELF- PAY/UNINSURED	\$239,510 \$952,163	\$235,492 \$751,105	(\$4,018) (\$201,058)	-2%
10	SAGA	\$952,163	\$751,105	(\$201,056)	-21% 0%
11	OTHER	\$313,593	\$181,321	(\$132,272)	-42%
	TOTAL INPATIENT GROSS REVENUE	\$72,222,518	\$68,939,980	(\$3,282,538)	-5%
B.	OUTPATIENT GROSS REVENUE	Ţ: _, <b>=_</b> ,;:. <b>0</b>	, , ,	(, -, <b>-</b> , <b>0</b> )	270
1	MEDICARE TRADITIONAL	\$32,538,187	\$36,340,316	\$3,802,129	12%
2	MEDICARE MANAGED CARE	\$5,887,234	\$7,012,100	\$1,124,866	19%
3	MEDICAID	\$15,280,624	\$28,407,771	\$13,127,147	86%
4	MEDICAID MANAGED CARE	\$12,598,916	\$3,318,606	(\$9,280,310)	-74%
5	CHAMPUS/TRICARE	\$437,537	\$459,513	\$21,976	5%
6	COMMERCIAL INSURANCE	\$54,124,923	\$58,832,726	\$4,707,803	9%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$2,372,135	\$2,293,820	(\$78,315)	-3%
10	SELF- PAY/UNINSURED SAGA	\$3,740,586 \$0	\$4,287,134 \$0	\$546,548 \$0	15% 0%
11	OTHER	\$180,466	\$258,122	\$77,656	43%
- ' '	TOTAL OUTPATIENT GROSS REVENUE	\$127,160,608	\$141,210,108	\$14,049,500	11%
	I O ME O O ME O O ME O O ME O O O O O O O	<b>V.21,100,000</b>	ψ, <u>Σ.ιο,</u> .ιοο	<b>4</b> 1,0 10,000	1170
C.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$70,904,941	\$73,475,661	\$2,570,720	4%
2	MEDICARE MANAGED CARE	\$11,354,884	\$13,096,316	\$1,741,432	15%
3	MEDICAID	\$22,865,623	\$37,978,273	\$15,112,650	66%
4	MEDICAID MANAGED CARE	\$16,277,955	\$4,012,180	(\$12,265,775)	-75%
<u>5</u>	CHAMPUS/TRICARE COMMERCIAL INSURANCE	\$555,008 \$69,626,262	\$671,350 \$72,909,314	\$116,342 \$3,283,052	21% 5%
7	NON-GOVERNMENT MANAGED CARE	\$09,020,202	\$72,909,314	\$3,283,052	0%
	WORKER'S COMPENSATION	\$2,611,645	\$2,529,312	(\$82,333)	
	SELF- PAY/UNINSURED	\$4,692,749	\$5,038,239	\$345,490	7%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$494,059	\$439,443	(\$54,616)	-11%
	TOTAL GROSS REVENUE	\$199,383,126	\$210,150,088	\$10,766,962	5%
II.	NET REVENUE BY PAYER				T
<u> </u>	INDATION AND DEVENUE				
-	INPATIENT NET REVENUE	MOD 400 040	<b>604 070 570</b>	<b>#075 70</b> 0	407
1	MEDICARE TRADITIONAL	\$23,402,812	\$24,278,572	\$875,760	4%
3	MEDICARE MANAGED CARE MEDICAID	\$2,932,137 \$2,510,251	\$3,705,836 \$4,029,946	\$773,699 \$1,519,695	26% 61%
4	MEDICAID MEDICAID MANAGED CARE	\$1,653,364	\$290,987	(\$1,362,377)	-82%
5	CHAMPUS/TRICARE	\$53,482	\$80,646	\$27,164	51%
6	COMMERCIAL INSURANCE	\$9,205,280	\$9,061,085	(\$144,195)	-2%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$161,785	\$136,525	(\$25,260)	-16%
9	SELF- PAY/UNINSURED	\$46,750	\$15,020	(\$31,730)	-68%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$118,590	\$43,905	(\$74,685)	-63%

#### REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$40,084,451	\$41,642,522	\$1,558,071	4%
B.	OUTPATIENT NET REVENUE		. ,	. , .	
1	MEDICARE TRADITIONAL	\$8,007,435	\$8,305,309	\$297,874	4%
2	MEDICARE MANAGED CARE	\$1,466,728	\$1,512,586	\$45,858	3%
3	MEDICAID	\$3,390,249	\$6,788,311	\$3,398,062	100%
4	MEDICAID MANAGED CARE	\$3,315,979	\$819,557	(\$2,496,422)	-75%
5	CHAMPUS/TRICARE	\$134,184	\$115,885	(\$18,299)	-14%
6	COMMERCIAL INSURANCE	\$24,461,844	\$25,929,632	\$1,467,788	6%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$1,495,438	\$1,652,741	\$157,303	11%
9	SELF- PAY/UNINSURED	\$122,464	\$108,762	(\$13,702)	-11%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$28,274	\$30,210	\$1,936	7%
	TOTAL OUTPATIENT NET REVENUE	\$42,422,595	\$45,262,993	\$2,840,398	7%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$31,410,247	\$32,583,881	\$1,173,634	4%
2	MEDICARE MANAGED CARE	\$4,398,865	\$5,218,422	\$819,557	19%
3	MEDICAID	\$5,900,500	\$10,818,257	\$4,917,757	83%
4	MEDICAID MANAGED CARE	\$4,969,343	\$1,110,544	(\$3,858,799)	-78%
5	CHAMPUS/TRICARE	\$187,666	\$196,531	\$8,865	5%
6	COMMERCIAL INSURANCE	\$33,667,124	\$34,990,717	\$1,323,593	4%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$1,657,223	\$1,789,266	\$132,043	8%
9	SELF- PAY/UNINSURED	\$169,214	\$123,782	(\$45,432)	-27%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$146,864	\$74,115	(\$72,749)	-50%
	TOTAL NET REVENUE	\$82,507,046	\$86,905,515	\$4,398,469	5%
III.	STATISTICS BY PAYER				
Α.	<u>DISCHARGES</u>				
1	MEDICARE TRADITIONAL	2,057	2,009	(48)	-2%
2	MEDICARE MANAGED CARE	315	317	2	1%
3	MEDICAID	529	889	360	68%
4	MEDICAID MANAGED CARE	506	81	(425)	0.40/
5	CHAMPUS/TRICARE				-84%
6		18	17	(1)	-6%
	COMMERCIAL INSURANCE	1,174	1,110	(1) (64)	-6% -5%
7	NON-GOVERNMENT MANAGED CARE	1,174 0	1,110 0	(1) (64) 0	-6% -5% 0%
7	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	1,174 0 16	1,110 0 12	(1) (64) 0 (4)	-6% -5% 0% -25%
7 8 9	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED	1,174 0 16 66	1,110 0 12 56	(1) (64) 0 (4) (10)	-6% -5% 0% -25% -15%
7 8 9 10	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA	1,174 0 16 66 0	1,110 0 12 56 0	(1) (64) 0 (4) (10) 0	-6% -5% 0% -25% -15% 0%
7 8 9	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER	1,174 0 16 66 0 20	1,110 0 12 56 0	(1) (64) 0 (4) (10) 0 (5)	-6% -5% 0% -25% -15% 0% -25%
7 8 9 10 11	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES	1,174 0 16 66 0	1,110 0 12 56 0	(1) (64) 0 (4) (10) 0	-6% -5% 0% -25% -15% 0%
7 8 9 10 11	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS	1,174 0 16 66 0 20 4,701	1,110 0 12 56 0 15 4,506	(1) (64) 0 (4) (10) 0 (5) (195)	-6% -5% 0% -25% -15% 0% -25% -4%
7 8 9 10 11 <b>B.</b>	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL	1,174 0 16 66 0 20 4,701	1,110 0 12 56 0 15 <b>4,506</b>	(1) (64) 0 (4) (10) 0 (5) (195)	-6% -5% 0% -25% -15% 0% -25% -4%
7 8 9 10 11 <b>B.</b> 1	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE	1,174 0 16 66 0 20 4,701 10,775 1,625	1,110 0 12 56 0 15 4,506	(1) (64) 0 (4) (10) 0 (5) (195) (766)	-6% -5% 0% -25% -15% 0% -25% -4% -7%
7 8 9 10 11 <b>B.</b> 1 2	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251	1,110 0 12 56 0 15 4,506 10,009 1,740 2,936	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30%
7 8 9 10 11 <b>B.</b> 1 2 3	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MANAGED CARE	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251 1,274	1,110 0 12 56 0 15 4,506 10,009 1,740 2,936 219	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685 (1,055)	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30% -83%
7 8 9 10 11 <b>B.</b> 1 2 3 4 5	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251 1,274 35	1,110 0 12 56 0 15 4,506 10,009 1,740 2,936 219 66	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685 (1,055)	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30% -83% 89%
7 8 9 10 11 <b>B.</b> 1 2 3 4 5 6	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251 1,274 35 3,694	1,110 0 12 56 0 15 4,506 10,009 1,740 2,936 219 66 3,458	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685 (1,055) 31 (236)	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30% -83% 89% -6%
7 8 9 10 11 <b>B.</b> 1 2 3 4 5 6	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251 1,274 35 3,694 0	1,110 0 12 56 0 15 4,506 10,009 1,740 2,936 219 66 3,458 0	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685 (1,055) 31 (236)	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30% -83% 89% -6% 0%
7 8 9 10 11 <b>B.</b> 1 2 3 4 5 6 7	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251 1,274 35 3,694 0 52	1,110 0 12 56 0 15 <b>4,506</b> 10,009 1,740 2,936 219 66 3,458 0 42	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685 (1,055) 31 (236) 0 (10)	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30% -83% 89% -6% 0% -19%
7 8 9 10 11 8. 1 2 3 4 5 6 7 8	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251 1,274 35 3,694 0 52 220	1,110 0 12 56 0 15 <b>4,506</b> 10,009 1,740 2,936 219 66 3,458 0 42 156	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685 (1,055) 31 (236) 0 (10) (64)	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30% -83% 89% -6% 0% -19% -29%
7 8 9 10 11 8. 1 2 3 4 5 6 7 8 9	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251 1,274 35 3,694 0 52 220 0	1,110 0 12 56 0 15 <b>4,506</b> 10,009 1,740 2,936 219 66 3,458 0 42 156 0	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685 (1,055) 31 (236) 0 (10) (64)	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30% -83% 89% -6% 0% -19% -29%
7 8 9 10 11 8. 1 2 3 4 5 6 7 8	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251 1,274 35 3,694 0 52 220 0 70	1,110 0 12 56 0 15 <b>4,506</b> 10,009 1,740 2,936 219 66 3,458 0 42 156 0	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685 (1,055) 31 (236) 0 (10) (64) 0	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30% -83% 89% -6% 0% -19% -29% 0% -33%
7 8 9 10 11 8 1 2 3 4 5 6 7 8 9 10	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA	1,174 0 16 66 0 20 4,701 10,775 1,625 2,251 1,274 35 3,694 0 52 220 0	1,110 0 12 56 0 15 <b>4,506</b> 10,009 1,740 2,936 219 66 3,458 0 42 156 0	(1) (64) 0 (4) (10) 0 (5) (195) (766) 115 685 (1,055) 31 (236) 0 (10) (64)	-6% -5% 0% -25% -15% 0% -25% -4% -7% 7% 30% -83% 89% -6% 0% -19% -29%

#### REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
1	MEDICADE TRADITIONAL	42.541	40.322	(2.210)	F9/
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	7,587	8,175	(2,219) 588	-5% 8%
3	MEDICAID	14,362	29,740	15,378	107%
4	MEDICAID MANAGED CARE	17,743	4,351	(13,392)	-75%
5	CHAMPUS/TRICARE	532	526	(6)	-1%
6	COMMERCIAL INSURANCE	72,640	69,340	(3,300)	-5%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	1,816	1,917	101	6%
9	SELF- PAY/UNINSURED	5,128	5,576	448	9%
10	SAGA	0	0	0	0%
11	OTHER TOTAL OUTPATIENT VISITS	162	228	66	41% - <b>1%</b>
	TOTAL OUTPATIENT VISITS	162,511	160,175	(2,336)	-1%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
Α.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVI		<b>AC - 1</b>	<b></b> :	
1	MEDICARE TRADITIONAL	\$5,762,199	\$6,843,655	\$1,081,456	19%
2	MEDICARE MANAGED CARE	\$847,284	\$1,223,715	\$376,431	44%
3	MEDICAID MEDICAID MANAGED CARE	\$7,640,412 \$6,462,154	\$14,717,702 \$1,647,567	\$7,077,290 (\$4,814,587)	93%
5	CHAMPUS/TRICARE	\$0,462,154	\$1,647,567	(\$4,814,587) \$26,934	-75% 13%
6	COMMERCIAL INSURANCE	\$11,876,912	\$12,260,325	\$383,413	3%
7	NON-GOVERNMENT MANAGED CARE	\$11,870,912	\$12,200,323	\$000,410	0%
8	WORKER'S COMPENSATION	\$554,692	\$589,474	\$34,782	6%
9	SELF- PAY/UNINSURED	\$2,363,314	\$2,784,937	\$421,623	18%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$149,142	\$154,660	\$5,518	4%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	, ,		. ,	
	GROSS REVENUE	\$35,865,955	\$40,458,815	\$4,592,860	13%
В.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENU			4	
1	MEDICARE TRADITIONAL	\$1,453,094	\$1,744,090	\$290,996	20%
2	MEDICARE MANAGED CARE	\$212,062	\$305,248	\$93,186	44%
4	MEDICAID MANAGED CARE	\$1,528,494	\$3,239,228 \$407.089	\$1,710,734	112%
5	MEDICAID MANAGED CARE CHAMPUS/TRICARE	\$1,634,434	\$407,089	(\$1,227,345)	-75%
6	COMMERCIAL INSURANCE	\$65,926 \$5,527,783	\$5,624,669	(\$3,632) \$96,886	-6% 2%
7	NON-GOVERNMENT MANAGED CARE	\$0,527,765	\$5,624,669	\$90,000	0%
8	WORKER'S COMPENSATION	\$391.004	\$421,845	\$30,841	8%
9	SELF- PAY/UNINSURED	\$43,188	\$42,031	(\$1,157)	
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$21,961	\$14,542	(\$7,419)	-34%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	<b></b>	***	*	
	NET REVENUE	\$10,877,946	\$11,861,036	\$983,090	9%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS	2 020	4 740	707	200/
2	MEDICARE TRADITIONAL	3,929	4,716	787	20%
3	MEDICARE MANAGED CARE MEDICAID	543 5,473	783 12,461	6,988	44% 128%
4	MEDICAID MANAGED CARE	7,603	1,964	(5,639)	-74%
5	CHAMPUS/TRICARE	197	219	(3,039)	11%
6	COMMERCIAL INSURANCE	9,677	9,895	218	2%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	746	758	12	2%
9	SELF- PAY/UNINSURED	2,446	2,697	251	10%
10	SAGA	0	0	0	0%
11	OTHER	130	125	(5)	-4%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	30,744	33,618	2,874	9%

#### REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
	OPERATING EVERNOE BY CATEGORY				
I.	OPERATING EXPENSE BY CATEGORY				
Α.	Salaries & Wages:				
1	Nursing Salaries	\$12,572,579	\$13,759,500	\$1,186,921	9%
2	Physician Salaries	\$2,054,798	\$2,572,919	\$518,121	25%
3	Non-Nursing, Non-Physician Salaries	\$26,718,419	\$26,574,906	(\$143,513)	-1%
	Total Salaries & Wages	\$41,345,796	\$42,907,325	\$1,561,529	4%
В.	Fringe Benefits:	£4.004.400	£4.040.004	¢00.040	40/
2	Nursing Fringe Benefits Physician Fringe Benefits	\$4,891,166 \$799,387	\$4,918,084 \$919,643	\$26,918 \$120,256	1% 15%
3	Non-Nursing, Non-Physician Fringe Benefits	\$10,394,386	\$9,498,719	(\$895,667)	-9%
	Total Fringe Benefits	\$16,084,939	\$15,336,446	(\$748,493)	-5%
	Total I mige Benefits	Ψ10,004,000	Ψ10,000,440	(ψ1 40,400)	070
C.	Contractual Labor Fees:				
1	Nursing Fees	\$488,358	\$693,243	\$204,885	42%
2	Physician Fees	\$693,799	\$930,637	\$236,838	34%
3	Non-Nursing, Non-Physician Fees	\$6,116,829	\$8,732,259	\$2,615,430	43%
	Total Contractual Labor Fees	\$7,298,986	\$10,356,139	\$3,057,153	42%
D.	Medical Supplies and Pharmaceutical Cost:				
D.	Medical Supplies and Pharmaceutical Cost:  Medical Supplies	\$5,503,723	\$5,362,794	(\$140,929)	-3%
2	Pharmaceutical Costs	\$2,274,118	\$2,279,864	\$5,746	0%
	Total Medical Supplies and Pharmaceutical Cost	\$7,777,841	\$7,642,658	(\$135,183)	-2%
	Total modical cappings and i harmacouncal cook	Ψ1,111,011	ψ. ,σ : <u>=</u> ,σσσ	(\$100,100)	270
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$1,673,434	\$1,512,071	(\$161,363)	-10%
2	Depreciation-Equipment	\$2,856,493	\$2,624,263	(\$232,230)	-8%
3	Amortization	\$15,923	\$10,771	(\$5,152)	-32%
	Total Depreciation and Amortization	\$4,545,850	\$4,147,105	(\$398,745)	-9%
F.	Rad Dobte:				
1	Bad Debts: Bad Debts	\$3,365,182	\$3,839,277	\$474,095	14%
	Dad Debig	ψ5,505,102	ψ0,000,211	ψ+1+,000	1470
G.	Interest Expense:				
1	Interest Expense	\$1,476,666	\$1,325,543	(\$151,123)	-10%
H.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$609,350	\$659,252	\$49,902	8%
	Utilities:				
l. 1	Water	\$67,904	\$60,955	(\$6,949)	-10%
2	Natural Gas	\$728,167	\$577,526	(\$150,641)	-21%
3	Oil	\$3,836	\$0	(\$3,836)	-100%
4	Electricity	\$658,793	\$645,776	(\$13,017)	-2%
5	Telephone	\$162,331	\$140,078	(\$22,253)	-14%
6	Other Utilities	\$0	\$0	\$0	0%
	Total Utilities	\$1,621,031	\$1,424,335	(\$196,696)	-12%
J.	Business Expenses:	Ф0.40.00E	#007.000	/#O.4.04=\	4.407
1	Accounting Fees Legal Fees	\$242,695 \$444,650	\$207,880 \$197,119	(\$34,815) (\$257,532)	-14%
3	Consulting Fees	\$444,650 \$184,315	\$187,118 \$565,212	(\$257,532) \$380,897	-58%
4	Dues and Membership	\$184,315 \$374,452	\$565,212 \$322,393	\$380,897 (\$52,059)	207% -14%
5	Equipment Leases	\$374,452 \$638,999	\$322,393 \$543,128	(\$52,059) (\$95,871)	-14%
6	Building Leases	\$218,868	\$239,191	\$20,323	9%
7	Repairs and Maintenance	\$2,875,783	\$3,450,798	\$575,015	20%
8	Insurance	\$275,990	\$68,703	(\$207,287)	-75%

#### REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
9	Travel	\$53,684	\$65,215	\$11,531	21%
10	Conferences	\$163,578	\$153,775	(\$9,803)	-6%
11	Property Tax	\$71,745	\$71,303	(\$442)	-1%
12	General Supplies	\$1,441,730	\$1,376,923	(\$64,807)	-4%
13	Licenses and Subscriptions	\$65,568	\$56,452	(\$9,116)	-14%
14	Postage and Shipping	\$132,176	\$91,212	(\$40,964)	-31%
15	Advertising	\$368,966	\$587,391	\$218,425	59%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$0	\$0	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$0	\$0	\$0	0%
20	Lab Fees / Red Cross charges	\$0	\$0	\$0	0%
21	Billing & Collection / Bank Fees	\$0	\$0	\$0	0%
22	Recruiting / Employee Education & Recognition	\$0	\$0	\$0	0%
23	Laundry / Linen	\$0	\$0	\$0	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$0 \$0	\$0	0% 0%
26	Purchased Services - Medical	\$0 \$0	\$0 \$0	\$0 \$0	
27 28	Purchased Services - Non Medical	\$0	\$0 \$0	\$0 (\$365,336)	0%
20	Other Business Expenses Total Business Expenses	\$365,236 <b>\$7,918,435</b>	\$7,986,694	(\$365,236) <b>\$68,259</b>	-100% <b>1%</b>
	Total Busiless Expenses	\$1,910,433	<b>\$7,900,094</b>	\$00,239	1 70
	Other Operating Expense:				
K.		<b>\$505.440</b>	\$825,343	\$229,930	39%
<b>K</b> .	Miscellaneous Other Operating Expenses	<b>3090.413</b> I			0070
	Miscellaneous Other Operating Expenses	\$595,413	φο <u>σο</u> ίο το		
	Miscellaneous Other Operating Expenses  Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov	\$92,639,489	\$96,450,117	\$3,810,628	4% nt on Report 150
1	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov	\$92,639,489	\$96,450,117	\$3,810,628	
	Total Operating Expenses - All Expense Categories*	\$92,639,489	\$96,450,117	\$3,810,628	
1	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov	\$92,639,489	\$96,450,117	\$3,810,628	
1 II.	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT	\$92,639,489 e must agree with \$2,402,375	\$96,450,117	\$3,810,628 ng expenses amou \$438,180	
II.  A.  1 2	*A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration General Accounting	\$92,639,489 e must agree with \$2,402,375 \$751,182	\$96,450,117 the total operation \$2,840,555 \$1,110,969	\$3,810,628 ng expenses amou \$438,180 \$359,787	18% 48%
II.  A.  1 2 3	*A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration General Accounting Patient Billing & Collection	\$92,639,489 e must agree with \$2,402,375 \$751,182 \$587,163	\$96,450,117 the total operation \$2,840,555 \$1,110,969 \$121,608	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555)	18% 48% -79%
II.  A.  1 2 3 4	*A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration General Accounting Patient Billing & Collection Admitting / Registration Office	\$92,639,489 e must agree with \$2,402,375 \$751,182 \$587,163 \$1,569,500	\$96,450,117 the total operation \$2,840,555 \$1,110,969 \$121,608 \$2,014,613	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113	18% 48% -79% 28%
II.  A.  1 2 3 4 5	*A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing	\$92,639,489 e must agree with \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588	\$96,450,117 the total operation \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770	18% 48% -79% 28% 6%
II.  A.  1 2 3 4 5 6	*A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration  General Accounting  Patient Billing & Collection  Admitting / Registration Office  Data Processing  Communications	\$92,639,489 e must agree with \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425	18% 48% -79% 28% 6% 5%
II.  A.  1 2 3 4 5 6 7	*A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration  General Accounting  Patient Billing & Collection  Admitting / Registration Office  Data Processing  Communications  Personnel	\$92,639,489 e must agree with \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248)	18% 48% -79% 28% 6% 5% -17%
II.  A.  1 2 3 4 5 6 7 8	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration  General Accounting  Patient Billing & Collection  Admitting / Registration Office  Data Processing  Communications  Personnel  Public Relations	\$92,639,489 e must agree with \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916	18% 48% -79% 28% 6% 5% -17% 44%
II.  A.  1 2 3 4 5 6 7 8 9	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration  General Accounting  Patient Billing & Collection  Admitting / Registration Office  Data Processing  Communications  Personnel  Public Relations  Purchasing	\$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113	18% 48% -79% 28% 6% 5% -17% 44% 41%
1 II. A. 1 2 3 4 5 6 7 8 9 10	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration  General Accounting  Patient Billing & Collection  Admitting / Registration Office  Data Processing  Communications  Personnel  Public Relations  Purchasing  Dietary and Cafeteria	\$92,639,489 e must agree with  \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488)	18% 48% -79% 28% 6% -17% 44% 41% -8%
II.  A. 1 2 3 4 5 6 7 8 9 10 11	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration  General Accounting  Patient Billing & Collection  Admitting / Registration Office  Data Processing  Communications  Personnel  Public Relations  Purchasing  Dietary and Cafeteria  Housekeeping	\$92,639,489  e must agree with  \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070	18% 48% -79% 28% 6% 5% -17% 44% 41% -8% 4%
II.  A. 1 2 3 4 5 6 7 8 9 10 11 12	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen	\$92,639,489  e must agree with  \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773	18% 48% -79% 28% 6% -17% 44% 41% -8% 4% 3%
1  II.  A.  1 2 3 4 5 6 7 8 9 10 11 12 13	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant	\$92,639,489  e must agree with  \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773 \$172,814	18% 48% -79% 28% 6% -5% -17% 44% 41% -8% 4% 3% 13%
1  II.  A.  1 2 3 4 5 6 7 8 9 10 11 12 13 14	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security	\$92,639,489  e must agree with  \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465 \$475,152	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279 \$400,423	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773	18% 48% -79% 28% 6% 5% -17% 44% 41% -8% 4% 3% 13% -16%
II.  A. 1 2 3 4 5 6 7 8 9 10 11 12 13	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance	\$92,639,489  e must agree with  \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465 \$475,152 \$1,767,949	\$96,450,117 the total operatir \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279 \$400,423 \$1,588,467	\$3,810,628  ng expenses amou  \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773 \$172,814 (\$74,729) (\$179,482)	18% 48% 48% -79% 28% 6% 5% -17% 44% 41% -8% 4% 3% 13% -16% -10%
II.  A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security	\$92,639,489  e must agree with  \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465 \$475,152	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279 \$400,423	\$3,810,628 ng expenses amou \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773 \$172,814 (\$74,729)	18% 48% 48% -79% 28% 6% 5% -17% 44% 41% -8% 4% 3% 13% -16% -10%
1 II. A. 1 2 3 4 4 5 6 7 8 9 10 11 12 13 14 15 16	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply	\$92,639,489  e must agree with  \$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465 \$475,152 \$1,767,949 \$469,357	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279 \$400,423 \$1,588,467 \$470,373	\$3,810,628  ng expenses amou  \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773 \$172,814 (\$74,729) (\$179,482) \$1,016	18% 48% 48% -79% 28% 6% 5% -17% 44% 41% -8% 3% -16% -10% 0% 2%
II.  A.  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department	\$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465 \$475,152 \$1,767,949 \$469,357 \$3,386,365	\$96,450,117 the total operation  \$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279 \$400,423 \$1,588,467 \$470,373 \$3,439,507	\$3,810,628  ag expenses amou  \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773 \$172,814 (\$74,729) (\$179,482) \$1,016 \$53,142	18% 48% 48% -79% 28% 6% 5% -17% 44% 41% -8% 4% -10% -10% 0% -2% -5%
II.  A.  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration  General Accounting  Patient Billing & Collection  Admitting / Registration Office  Data Processing  Communications  Personnel  Public Relations  Purchasing  Dietary and Cafeteria  Housekeeping  Laundry & Linen  Operation of Plant  Security  Repairs and Maintenance  Central Sterile Supply  Pharmacy Department  Other General Services  Total General Services	\$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465 \$475,152 \$1,767,949 \$469,357 \$3,386,365 \$416,369	\$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279 \$400,423 \$1,588,467 \$470,373 \$3,439,507 \$394,497	\$3,810,628  ag expenses amou  \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773 \$172,814 (\$74,729) (\$179,482) \$1,016 \$53,142 (\$21,872)	18% 48% 48% -79% 28% 6% 5% -17% 44% 41% -8% 4% -10% -10% 0% -2% -5%
II.  A.  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services  Professional Services:	\$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465 \$475,152 \$1,767,949 \$469,357 \$3,386,365 \$416,369 \$20,927,613	\$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279 \$400,423 \$1,588,467 \$470,373 \$3,439,507 \$394,497 \$21,928,358	\$3,810,628  ag expenses amou  \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773 \$172,814 (\$74,729) (\$179,482) \$1,016 \$53,142 (\$21,872) \$1,000,745	18% 48% 48% -79% 28% 6% 5% -17% 44% 41% -8% 3% -16% -10% 0% 2% -5%
II.  A.  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18  B. 1	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services:  General Administration  General Accounting Patient Billing & Collection  Admitting / Registration Office  Data Processing  Communications  Personnel  Public Relations  Purchasing  Dietary and Cafeteria  Housekeeping  Laundry & Linen  Operation of Plant  Security  Repairs and Maintenance  Central Sterile Supply  Pharmacy Department  Other General Services  Total General Services:  Medical Care Administration	\$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465 \$475,152 \$1,767,949 \$469,357 \$3,386,365 \$416,369 \$20,927,613	\$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279 \$400,423 \$1,588,467 \$470,373 \$3,439,507 \$394,497 \$21,928,358	\$3,810,628  ag expenses amou  \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773 \$172,814 (\$74,729) (\$179,482) \$1,016 \$53,142 (\$21,872) \$1,000,745	18% 48% 48% -79% 28% 6% 5% -17% 44% 41% -8% 3% -16% -10% 0% 2% -5% 5%
II.  A.  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Total Operating Expenses - All Expense Categories*  *A K. The total operating expenses amount abov  OPERATING EXPENSE BY DEPARTMENT  General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services  Professional Services:	\$2,402,375 \$751,182 \$587,163 \$1,569,500 \$2,271,588 \$142,211 \$855,778 \$678,364 \$210,270 \$2,009,913 \$1,094,760 \$558,852 \$1,280,465 \$475,152 \$1,767,949 \$469,357 \$3,386,365 \$416,369 \$20,927,613	\$2,840,555 \$1,110,969 \$121,608 \$2,014,613 \$2,405,358 \$149,636 \$706,530 \$976,280 \$296,383 \$1,841,425 \$1,142,830 \$575,625 \$1,453,279 \$400,423 \$1,588,467 \$470,373 \$3,439,507 \$394,497 \$21,928,358	\$3,810,628  ag expenses amou  \$438,180 \$359,787 (\$465,555) \$445,113 \$133,770 \$7,425 (\$149,248) \$297,916 \$86,113 (\$168,488) \$48,070 \$16,773 \$172,814 (\$74,729) (\$179,482) \$1,016 \$53,142 (\$21,872) \$1,000,745	18% 48% 48% -79% 28% 6% 5% -17% 44% 41% -8% 3% -16% -10% 0% 2% -5%

#### REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
5	Social Service	\$0	\$0	\$0	0%
6	Other Professional Services	\$396,996	\$466,590	\$69,594	18%
	Total Professional Services	\$4,048,060	\$4.504.427	\$456,367	11%
	Total i Totossional oci viocs	ψ+,0+0,000	Ψ4,004,421	ψ-100,001	1170
C.	Special Services:				
1	Operating Room	\$4,453,788	\$4,440,847	(\$12,941)	0%
2	Recovery Room	\$186,803	\$200,783	\$13,980	7%
3	Anesthesiology	\$0	\$0	\$0	0%
4	Delivery Room	\$860,152	\$957,431	\$97,279	11%
5	Diagnostic Radiology	\$2,481,443	\$2,561,791	\$80,348	3%
6	Diagnostic Ultrasound	\$506,680	\$495,361	(\$11,319)	-2%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$650,015	\$566,103	(\$83,912)	-13%
9	CT Scan	\$465,067	\$493,150	\$28,083	6%
10	Laboratory	\$4,369,258	\$4,391,617	\$22,359	1%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$509,260	\$582,611	\$73,351	14%
13	Electrocardiology	\$193,307	\$148,546	(\$44,761)	-23%
14	Electroencephalography	\$189,184	\$321,023	\$131,839	70%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18 19	Respiratory Therapy	\$1,082,620	\$1,159,372	\$76,752	7% 0%
20	Pulmonary Function Intravenous Therapy	\$0	\$0 \$0	\$0 \$0	0%
21	Shock Therapy	\$0 \$0	\$0 \$0	\$0 \$0	0%
22	Psychiatry / Psychology Services	\$0	\$0 \$0	\$0 \$0	0%
23	Renal Dialysis	\$0	\$0 \$0	\$0 \$0	0%
24	Emergency Room	\$5,018,896	\$5,776,716	\$757,820	15%
25	MRI	\$514,684	\$494,273	(\$20,411)	-4%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$640,476	\$682,484	\$42,008	7%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$1,530,288	\$1,728,550	\$198,262	13%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$3,952,322	\$4,902,951	\$950,629	24%
	Total Special Services	\$27,604,243	\$29,903,609	\$2,299,366	8%
D.	Routine Services:			<u> </u>	
1	Medical & Surgical Units	\$6,702,480	\$6,770,389	\$67,909	1%
2	Intensive Care Unit	\$2,245,182	\$2,576,171	\$330,989	15%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$0	\$0 \$0	\$0	0%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$491,789	\$547,415	\$55,626	11%
7	Newborn Nursery Unit	\$309,199	\$344,173	\$34,974	11%
8	Neonatal ICU Rehabilitation Unit	\$0 \$0	\$0 \$0	\$0 \$0	0%
9 10	Ambulatory Surgery				0% -1%
11		\$1,249,314 \$0	\$1,236,067	(\$13,247) \$0	-1% 0%
11	Home Care	\$0	\$0	\$0	0%

	WINDHAM COMI	MUNITY MEMORIAL HOSPI	TAL							
	TWELVE N	ONTHS ACTUAL FILING								
	FISCAL YEAR 2012									
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS									
(1)	(2)	(3)	(4)	(5)						
, ,	·	ACTUAL	ACTUAL	ACTUAL						
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012						
Α.	Statement of Operations Summary									
1	Total Net Patient Revenue	\$86,942,706	\$ 85,855,448	\$90,160,381						
2	Other Operating Revenue	2,622,664	3,044,239	5,761,698						
3	Total Operating Revenue	\$89,565,370	\$88,899,687	\$95,922,079						
4	Total Operating Expenses	91,501,818	92,639,489	96,450,117						
5	Income/(Loss) From Operations	(\$1,936,448)	(\$3,739,802)	(\$528,038)						
6	Total Non-Operating Revenue	273,628	(323,008)	(185,298)						
7	Excess/(Deficiency) of Revenue Over Expenses	(\$1,662,820)	(\$4,062,810)	(\$713,336)						
В.	Profitability Summary									
1	Hospital Operating Margin	-2.16%	-4.22%	-0.55%						
2	Hospital Non Operating Margin	0.30%	-0.36%	-0.19%						
3	Hospital Total Margin	-1.85%	-4.59%	-0.75%						
4	Income/(Loss) From Operations	(\$1,936,448)	(\$3,739,802)	(\$528,038)						
5	Total Operating Revenue	\$89,565,370	\$88,899,687	\$95,922,079						
6	Total Non-Operating Revenue	\$273,628	(\$323,008)	(\$185,298)						
7	Total Revenue	\$89,838,998	\$88,576,679	\$95,736,781						
8	Excess/(Deficiency) of Revenue Over Expenses	(\$1,662,820)	(\$4,062,810)	(\$713,336)						
C.	Net Assets Summary									
1	Hospital Unrestricted Net Assets	(\$25,203,815)	(\$35,978,450)	(\$47,943,489)						
2	Hospital Total Net Assets	(\$19,935,723)	(\$31,049,573)	(\$42,522,947)						
3	Hospital Change in Total Net Assets	\$235,599	(\$11,113,850)	(\$11,473,374)						
4	Hospital Change in Total Net Assets %	98.8%	55.7%	37.0%						
D.	Cost Data Summary									
1	Ratio of Cost to Charges	0.47	0.46	0.45						
2	Total Operating Expenses	\$91,501,818	\$92,639,489	\$96,450,117						
3	Total Gross Revenue	\$193,955,564	\$199,383,125	\$210,150,088						
4	Total Other Operating Revenue	\$2,622,664	\$3,044,239	\$5,761,698						
5	Private Payment to Cost Ratio	1.01	1.07	1.09						
6	Total Non-Government Payments	\$34,004,938	\$35,493,561	\$36,903,765						

	WINDHAM COMM	UNITY MEMORIAL HOSPITAI							
	TWELVE MONTHS ACTUAL FILING								
		SCAL YEAR 2012							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
. ,		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012					
7	Total Uninsured Payments	\$302,544	\$169,214	\$123,782					
8	Total Non-Government Charges	\$76,539,290	\$76,930,656	\$80,476,865					
9	Total Uninsured Charges	\$4,858,520	\$4,692,749	\$5,038,239					
10	Medicare Payment to Cost Ratio	0.98	0.95	0.98					
11	Total Medicare Payments	\$36,106,801	\$35,809,112	\$37,802,303					
12	Total Medicare Charges	\$79,106,934	\$82,259,825	\$86,571,977					
13	Medicaid Payment to Cost Ratio	0.74	0.61	0.64					
14	Total Medicaid Payments	\$10,787,671	\$10,869,843	\$11,928,801					
15	Total Medicaid Charges	\$31,291,584	\$39,143,578	\$41,990,453					
16	Uncompensated Care Cost	\$2,938,954	\$2,771,904	\$3,050,367					
17	Charity Care	\$2,446,867	\$2,956,537	\$3,573,641					
18	Bad Debts	\$3,867,045	\$3,100,374	\$3,254,865					
19	Total Uncompensated Care	\$6,313,912	\$6,056,911	\$6,828,506					
20	Uncompensated Care % of Total Expenses	3.2%	3.0%	3.2%					
21	Total Operating Expenses	\$91,501,818	\$92,639,489	\$96,450,117					
		¥2.1,22.1,2.12	<b>4</b> 0=,000,100	<b>+</b> • • • • • • • • • • • • • • • • • • •					
E.	Liquidity Measures Summary								
1	Current Ratio	2.10	1.31	0.94					
2	Total Current Assets	\$22,752,848	\$21,775,957	\$31,097,898					
3	Total Current Liabilities	\$10,810,042	\$16,617,232	\$33,145,097					
4	Days Cash on Hand	14	10	16					
5	Cash and Cash Equivalents	\$3,314,081	\$2,502,682	\$4,122,969					
6	Short Term Investments	0	0	0					
7	Total Cash and Short Term Investments	\$3,314,081	\$2,502,682	\$4,122,969					
8	Total Operating Expenses	\$91,501,818	\$92,639,489	\$96,450,117					
9	Depreciation Expense	\$4,522,902	\$4,545,850	\$4,147,105					
10	Operating Expenses less Depreciation Expense	\$86,978,916	\$88,093,639	\$92,303,012					
11	Days Revenue in Patient Accounts Receivable	65.81	62.96	77.61					

	WINDHAM COMMUNIT	ГҮ МЕ	MORIAL HOSPI	TAL					
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2012								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)		(3)		(4)		(5)		
			ACTUAL		ACTUAL		ACTUAL		
LINE	DESCRIPTION		FY 2010		FY 2011		FY 2012		
12	Net Patient Accounts Receivable	\$	14,090,656	\$	14,881,466	\$	20,670,040		
13	Due From Third Party Payers		\$1,585,717		\$0		\$0		
14	Due To Third Party Payers		\$0		\$71,283		\$1,499,004		
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$	15,676,373	\$	14,810,183	\$	19,171,036		
16	Total Net Patient Revenue	Ψ	\$86,942,706	\$	85,855,448	\$	90,160,381		
10	Total Net Fatient Neveride		φου,942,700	Ψ	05,055,440	Ψ	90,100,361		
17	Average Payment Period		45.36		68.85		131.07		
18	Total Current Liabilities		\$10,810,042		\$16,617,232		\$33,145,097		
19	Total Operating Expenses		\$91,501,818		\$92,639,489		\$96,450,117		
20	Depreciation Expense		\$4,522,902		\$4,545,850		\$4,147,105		
21	Total Operating Expenses less Depreciation Expense		\$86,978,916		\$88,093,639		\$92,303,012		
	· • · · · · ·		, , ,						
F.	Solvency Measures Summary								
1	Equity Financing Ratio		(29.4)		(46.8)		(53.1)		
2	Total Net Assets		(\$19,935,723)		(\$31,049,573)		(\$42,522,947)		
3	Total Assets		\$67,833,577		\$66,369,494		\$80,143,133		
4	Cash Flow to Total Debt Ratio		9.5		1.3		6.5		
5	Excess/(Deficiency) of Revenues Over Expenses		(\$1,662,820)		(\$4,062,810)		(\$713,336)		
6	Depreciation Expense		\$4,522,902		\$4,545,850		\$4,147,105		
7	Excess of Revenues Over Expenses and Depreciation Expense		\$2,860,082		\$483,040		\$3,433,769		
8	Total Current Liabilities		\$10,810,042		\$16,617,232		\$33,145,097		
9	Total Long Term Debt		\$19,435,038		\$19,388,119		\$19,376,083		
10	Total Current Liabilities and Total Long Term Debt		\$30,245,080		\$36,005,351		\$52,521,180		
11	Long Term Debt to Capitalization Ratio		(3,881.7)		(166.3)		(83.7)		
12	Total Long Term Debt		\$19,435,038		\$19,388,119		\$19,376,083		
13	Total Net Assets		(\$19,935,723)		(\$31,049,573)		(\$42,522,947)		
14	Total Long Term Debt and Total Net Assets		(\$500,685)		(\$11,661,454)		(\$23,146,864)		
15	Debt Service Coverage Ratio		1.8		0.1		0.7		
16	Excess Revenues over Expenses		(\$1,662,820)		(\$4,062,810)		(\$713,336)		
17	Interest Expense		\$1,557,105		\$1,476,666		\$1,325,543		
18	Depreciation and Amortization Expense		\$4,522,902		\$4,545,850		\$4,147,105		

	WINDHAM COMMUNITY	MEMORIAL HOSPITAL	L					
	TWELVE MONTHS ACTUAL FILING  FISCAL YEAR 2012  REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
. ,		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012				
LINE	DESCRIPTION	11 2010	112011	11 2012				
19	Principal Payments	\$886,449	\$19,866,618	\$5,571,922				
G.	Other Financial Ratios							
20	Average Age of Plant	13.8	14.7	16.9				
21	Accumulated Depreciation	\$62,488,848	\$66,982,063	\$70,034,957				
22	Depreciation and Amortization Expense	\$4,522,902	\$4,545,850	\$4,147,105				
				. , ,				
Н.	Utilization Measures Summary							
1	Patient Days	20.850	19,996	18,673				
2	Discharges	5,100	4,701	4,506				
3	ALOS	4.1	4.3	4.1				
4	Staffed Beds	87	87	87				
	Available Beds	- 01	144	144				
5		-						
6	Licensed Beds	144	144	144				
6	Occupancy of Staffed Beds	65.7%	63.0%	58.8%				
7	Occupancy of Available Beds	39.7%	38.0%	35.5%				
8	Full Time Equivalent Employees	603.4	607.5	601.6				
l.	Hospital Gross Revenue Payer Mix Percentage							
1	Non-Government Gross Revenue Payer Mix Percentage	37.0%	36.2%	35.9%				
2	Medicare Gross Revenue Payer Mix Percentage	40.8%	41.3%	41.2%				
3	Medicaid Gross Revenue Payer Mix Percentage	16.1%	19.6%	20.0%				
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	3.3%	0.2%	0.2%				
5	Uninsured Gross Revenue Payer Mix Percentage	2.5%	2.4%	2.4%				
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.3%	0.3%	0.3%				
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Gross Revenue (Charges)	\$71,680,770	\$72,237,907	\$75,438,626				
9	Medicare Gross Revenue (Charges)	\$79,106,934	\$82,259,825	\$86,571,977				
10	Medicaid Gross Revenue (Charges)	\$31,291,584	\$39,143,578	\$41,990,453				
11	Other Medical Assistance Gross Revenue (Charges)	\$6,408,291	\$494,058	\$439,443				
12	Uninsured Gross Revenue (Charges)	\$4,858,520	\$4,692,749	\$5,038,239				
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$609,465	\$555,008	\$671,350				
14	Total Gross Revenue (Charges)	\$193,955,564	\$199,383,125	\$210,150,088				
J.	Hospital Net Revenue Payer Mix Percentage		12.22	10.55				
1	Non-Government Net Revenue Payer Mix Percentage	40.9%	42.8%	42.39				

WINDHAM COMMUNITY	MEMORIAL HOSPITA	L					
TWELVE MONTHS	S ACTUAL FILING						
FISCAL YEAR 2012							
(2)	(3)	(4)	(5)				
	ACTUAL	ACTUAL	ACTUAL				
DESCRIPTION	FY 2010	FY 2011	FY 2012				
Medicare Net Revenue Payer Mix Percentage	43.8%	43.4%	43.5%				
Medicaid Net Revenue Payer Mix Percentage	13.1%	13.2%	13.7%				
Other Medical Assistance Net Revenue Payer Mix Percentage	1.6%	0.2%	0.1%				
Uninsured Net Revenue Payer Mix Percentage	0.4%	0.2%	0.1%				
CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.3%	0.2%	0.2%				
Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
Non-Government Net Revenue (Payments)	\$33,702,394	\$35,324,347	\$36,779,983				
Medicare Net Revenue (Payments)	\$36,106,801	\$35,809,112	\$37,802,303				
Medicaid Net Revenue (Payments)	\$10,787,671	\$10,869,843	\$11,928,801				
Other Medical Assistance Net Revenue (Payments)	\$1,361,046	\$146,864	\$74,115				
Uninsured Net Revenue (Payments)	\$302,544	\$169,214	\$123,782				
CHAMPUS / TRICARE Net Revenue Payments)	\$227,611	\$187,666	\$196,531				
Total Net Revenue (Payments)	\$82,488,067	\$82,507,046	\$86,905,515				
<u>Discharges</u>							
Non-Government (Including Self Pay / Uninsured)	1,381	1,256	1,178				
Medicare	2,517	2,372	2,326				
Medical Assistance	1,188	1,055	985				
Medicaid	1,061	1,035	970				
Other Medical Assistance	127	20	15				
CHAMPUS / TRICARE	14	18	17				
Uninsured (Included In Non-Government)	106	66	56				
Total	5,100	4,701	4,506				
Case Mix Index							
Non-Government (Including Self Pay / Uninsured)	0.926300	0.962000	0.954560				
Medicare	1.179900	1.272800	1.378940				
Medical Assistance	0.862090	0.892720	0.918711				
Medicaid	0.816400	0.896700	0.916430				
Other Medical Assistance	1.243800	0.686770	1.066240				
CHAMPUS / TRICARE	0.991300	0.588500	0.944530				
Uninsured (Included In Non-Government)	0.727000	1.056700	0.931780				
Total Case Mix Index	1.036680	1.101843	1.165750				
Emergency Department Visite							
	2 005	2.270	2.044				
ž i			3,244				
Emergency Room - Treated and Discharged  Total Emergency Room Visits	28,697 32,362	30,744 34,122	33,618 36,862				
	TWELVE MONTHS FISCAL  REPORT 185 - HOSPITAL FINANCIAL  (2)  DESCRIPTION  Medicare Net Revenue Payer Mix Percentage Medicaid Net Revenue Payer Mix Percentage Other Medical Assistance Net Revenue Payer Mix Percentage Uninsured Net Revenue Payer Mix Percentage Uninsured Net Revenue Payer Mix Percentage CHAMPUS / TRICARE Net Revenue Payer Mix Percentage Total Net Revenue Payer Mix Percentage  Non-Government Net Revenue (Payments) Medicare Net Revenue (Payments) Medicaid Net Revenue (Payments) Other Medical Assistance Net Revenue (Payments) Uninsured Net Revenue (Payments)  CHAMPUS / TRICARE Net Revenue Payments)  Total Net Revenue (Payments)  Discharges Non-Government (Including Self Pay / Uninsured) Medicare Medicaid Other Medical Assistance CHAMPUS / TRICARE Uninsured (Included In Non-Government) Total  Case Mix Index Non-Government (Including Self Pay / Uninsured) Medicare Medical Assistance Medicaid Other Medical Assistance CHAMPUS / TRICARE Uninsured (Included In Non-Government) Medicare Medical Assistance Medicaid Other Medical Assistance	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012   REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA	Care   Care				

(1)	(2)	(3)	(4)	(5)	(6)
	•	FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT	<b>^</b>	<b>***</b>	<b>*</b> * * * * * * * * * * * * * * * * * *	1000/
	Inpatient Charges	\$75,288	\$216,613	\$141,325	188%
	Inpatient Payments	\$46,816	\$115,168	\$68,352	146%
3	Outpatient Charges	\$55,779	\$216,925	\$161,146	289%
4	Outpatient Payments	\$16,340	\$46,987	\$30,647	188%
5	Discharges	5	10	5	100%
	Patient Days	34	63	29	85%
7	Outpatient Visits (Excludes ED Visits)	96	244	148	154%
8	Emergency Department Outpatient Visits	1	21	20	2000%
9	Emergency Department Inpatient Admissions	4	24	20	500%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$131,067	\$433,538	\$302,471	231%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$63,156	\$162,155	\$98,999	157%
В.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
		, ,	* -	* -	
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$1,955,197	\$2,841,342	\$886,145	45%
2	Inpatient Payments	\$1,201,980	\$1,804,066	\$602,086	50%
3	Outpatient Charges	\$2,259,415	\$3,162,382	\$902,967	40%
4	Outpatient Payments	\$552,093	\$678,732	\$126,639	23%
5	Discharges	123	144	21	17%
6	Patient Days	540	697	157	29%
7	Outpatient Visits (Excludes ED Visits)	2,404	3,150	746	31%
8	Emergency Department Outpatient Visits	179	264	85	47%
9	Emergency Department Inpatient Admissions	104	334	230	221%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,214,612	\$6,003,724	\$1,789,112	42%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,754,073	\$2,482,798	\$728,725	42%

(1)	(2)	(3)	(4)	(5)	(6)
	( )	FY 2011	FY 2012	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$410,618	\$0	(\$410,618)	-100%
2	Inpatient Payments	\$255,659	\$0	(\$255,659)	-100%
3	Outpatient Charges	\$469,614	\$0	(\$469,614)	-100%
4	Outpatient Payments	\$109,712	\$0	(\$109,712)	-100%
5	Discharges	28	0	(28)	-100%
6	Patient Days	144	0	(144)	-100%
7	Outpatient Visits (Excludes ED Visits)	704	0	(704)	-100%
8	Emergency Department Outpatient Visits	38	0	(38)	-100%
9	Emergency Department Inpatient Admissions	22	0	(22)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$880,232	\$0	(\$880,232)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$365,371	\$0	(\$365,371)	-100%
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$1,126,835	\$265,934	(\$860,901)	-76%
2	Inpatient Payments	\$511,104	\$158,011	(\$353,093)	-69%
3	Outpatient Charges	\$929,579	\$653,367	(\$276,212)	-30%
4	Outpatient Payments	\$217,510	\$141,522	(\$75,988)	-35%
5	Discharges	58	15	(43)	-74%
	Patient Days	330	64	(266)	-81%
7	Outpatient Visits (Excludes ED Visits)	931	644	(287)	-31%
8	Emergency Department Outpatient Visits	99	86	(13)	-13%
9	Emergency Department Inpatient Admissions	48	40	(8)	-17%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,056,414	\$919,301	(\$1,137,113)	-55%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$728,614	\$299,533	(\$429,081)	-59%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVAN			*-	
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
	( /	FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
Н.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
I.	AETNA				
1	Inpatient Charges	\$74,028	\$57,874	(\$16,154)	-22%
2	Inpatient Charges Inpatient Payments	\$38,648	\$33,688	(\$4,960)	-13%
3	Outpatient Charges	\$155,778	\$156,445	\$667	0%
4	Outpatient Charges Outpatient Payments	\$79,040	\$33,887	(\$45,153)	-57%
5	Discharges	\$79,040	φ33,66 <i>1</i>	(1)	-25%
6	Patient Days	28	<u></u>	(10)	-36%
7	Outpatient Visits (Excludes ED Visits)	157	171	14	9%
8	Emergency Department Outpatient Visits	5	12	7	140%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	3	9	6	200%
J	TOTAL INPATIENT & OUTPATIENT CHARGES	\$229,806	\$214,319	(\$15,487)	- <b>7%</b>
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$117.688	\$67,575	(\$50,113)	-43%
	TOTAL IN ATIENT & COTTATIENT FATWENTS	φιιι,000	φυ <i>τ</i> ,375	(\$50,113)	-43%

(1)	(2)	(3)	(4)	(5)	(6)
	,	FY 2011	FY 2012	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
J.	HUMANA				
1	Inpatient Charges	\$0	\$10,564	\$10,564	0%
2	Inpatient Payments	\$0	\$10,564	\$10,564	0%
3	Outpatient Charges	\$6,872	\$22,892	\$16,020	233%
4	Outpatient Payments	\$1,684	\$4,959	\$3,275	194%
5	Discharges	0	1	1	0%
6	Patient Days	0	4	4	0%
7	Outpatient Visits (Excludes ED Visits)	10	25	15	150%
8	Emergency Department Outpatient Visits	2	0	(2)	-100%
9	Emergency Department Inpatient Admissions	0	2	2	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,872	\$33,456	\$26,584	387%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,684	\$15,523	\$13,839	822%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$530,558	\$844,489	\$313,931	59%
2	Inpatient Payments	\$241,279	\$498,622	\$257,343	107%
3	Outpatient Charges	\$415,962	\$732,269	\$316,307	76%
4	Outpatient Payments	\$111,763	\$158,612	\$46,849	42%
5	Discharges	25	40	15	60%
6	Patient Days	132	288	156	118%
7	Outpatient Visits (Excludes ED Visits)	376	695	319	85%
8	Emergency Department Outpatient Visits	36	95	59	164%
9	Emergency Department Inpatient Admissions	23	114	91	396%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$946,520	\$1,576,758	\$630,238	67%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$353,042	\$657,234	\$304,192	86%
	UNICARE LIFE & HEALTH INSURANCE				
<u>L.</u>		\$0	\$0	\$0	0%
1	Inpatient Charges Inpatient Payments	\$0		\$0	
3		\$0	\$0 \$0	\$0	0% 0%
4	Outpatient Charges	\$0	\$0 \$0	\$0 \$0	0%
	Outpatient Payments			· ·	
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7 8	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0		0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0	0%
	IUIAL INPAHENI & UUIPAHENI PAYMENIS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
1.7	(2)	FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
М.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$1,295,126	\$1,847,400	\$552,274	43%
2	Inpatient Payments	\$636,651	\$1,085,717	\$449,066	71%
3	Outpatient Charges	\$1,594,235	\$2,067,820	\$473,585	30%
4	Outpatient Payments	\$378,586	\$447,887	\$69,301	18%
5	Discharges	72	104	32	44%
6	Patient Days	417	606	189	45%
7	Outpatient Visits (Excludes ED Visits)	2,366	2,463	97	4%
8	Emergency Department Outpatient Visits	183	305	122	67%
9	Emergency Department Inpatient Admissions	69	287	218	316%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,889,361	\$3,915,220	\$1,025,859	36%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,015,237	\$1,533,604	\$518,367	51%
		<b>V</b> 1,010,001	<b>¥</b> 1,000,000	40.000	33,0
II.	TOTAL MEDICARE MANAGED CARE				
111.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$5,467,650	\$6,084,216	\$616,566	11%
	TOTAL INPATIENT PAYMENTS	\$2,932,137	\$3,705,836	\$773,699	26%
	TOTAL OUTPATIENT CHARGES	\$5,887,234	\$7,012,100	\$1,124,866	19%
	TOTAL OUTPATIENT PAYMENTS	\$1,466,728	\$1,512,586	\$45,858	3%
	TOTAL DISCHARGES	315	317	2	1%
	TOTAL PATIENT DAYS	1,625	1,740	115	7%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	7,044	7,392	348	5%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	543	783	240	44%
	TOTAL EMERGENCY DEPARTMENT				4.5
-	INPATIENT ADMISSIONS	273	810	537	197%
-	TOTAL INPATIENT & OUTPATIENT CHARGES	\$11,354,884	\$13,096,316	\$1,741,432	15%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,398,865	\$5,218,422	\$819,557	19%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICAID MANAGED CARE				
Α.	ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$2,429,181	\$420,834	(\$2,008,347)	-83%
2	Inpatient Payments	\$1,047,461	\$190,634	(\$856,827)	-82%
3	Outpatient Charges	\$8,808,475	\$2,345,099	(\$6,463,376)	-73%
4	Outpatient Payments	\$2,412,472	\$578,148	(\$1,834,324)	-76%
5	Discharges	323	55	(268)	-83%
6	Patient Days	803	134	(669)	-83%
7	Outpatient Visits (Excludes ED Visits)	6,917	1,660	(5,257)	-76%
8	Emergency Department Outpatient Visits	5,246	1,388	(3,858)	-74%
9	Emergency Department Inpatient Admissions	100	51	(49)	-49%
	TOTAL INPATIENT & OUTPATIENT			,	
	CHARGES	\$11,237,656	\$2,765,933	(\$8,471,723)	-75%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$3,459,933	\$768,782	(\$2,691,151)	-78%
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				2,75
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT	·	•	,	
	PAYMENTS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2011	FY 2012	AMÒÚNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
_	WELL CARE OF CONNECTICUT				
<b>E</b> .	Inpatient Charges	\$0	\$0	\$0	00/
2	Inpatient Charges Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
3	Outpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	0%
4	Outpatient Charges Outpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0%
5	Discharges	0	φ <sub>0</sub>	φ <sub>0</sub>	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
9	TOTAL INPATIENT & OUTPATIENT	U	U	U	0 78
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT	ΨΟ	ΨΟ	ΨΟ	070
	PAYMENTS	\$0	\$0	\$0	0%
	FIRST CHOICE OF CONNECTICUT,	**	**	**	
F.	PREFERRED ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMÒÚNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
•	LINITED LIEAL THOADE				
<b>G</b> .	Inpatient Charges	\$506,145	\$138,268	(\$367,877)	-73%
2	Inpatient Granges Inpatient Payments	\$256,744	\$47,488	(\$209,256)	-82%
3	Outpatient Charges	\$1,577,030	\$377,267	(\$1,199,763)	-76%
4	Outpatient Payments	\$406,627	\$93,554	(\$313,073)	-77%
5	Discharges	77	φυυ,υυτ	(68)	-88%
6	Patient Days	197	40	(157)	-80%
7	Outpatient Visits (Excludes ED Visits)	1,490	330	(1,160)	-78%
8	Emergency Department Outpatient Visits	1,001	213	(788)	-79%
9	Emergency Department Inpatient Admissions	17	8	(9)	-53%
	TOTAL INPATIENT & OUTPATIENT		<u> </u>	(0)	0070
	CHARGES	\$2,083,175	\$515,535	(\$1,567,640)	-75%
	TOTAL INPATIENT & OUTPATIENT	<b>\$2,000,110</b>	ψο 10,000	(\$1,001,010)	1070
	PAYMENTS	\$663,371	\$141,042	(\$522,329)	-79%
Н.	AETNA				
1	Inpatient Charges	\$743,713	\$134,472	(\$609,241)	-82%
2	Inpatient Payments	\$349,159	\$52,865	(\$296,294)	-85%
3	Outpatient Charges	\$2,213,411	\$596,240	(\$1,617,171)	-73%
4	Outpatient Payments	\$496,880	\$147,855	(\$349,025)	-70%
5	Discharges	106	17	(89)	-84%
6	Patient Days	274	45	(229)	-84%
7	Outpatient Visits (Excludes ED Visits)	1,733	397	(1,336)	-77%
8	Emergency Department Outpatient Visits	1,356	363	(993)	-73%
9	Emergency Department Inpatient Admissions	22	36	14	64%
	TOTAL INPATIENT & OUTPATIENT	20.057.404	<b>^</b>	(00.000.440)	750/
	CHARGES TOTAL INPATIENT & OUTPATIENT	\$2,957,124	\$730,712	(\$2,226,412)	-75%
	PAYMENTS	\$846,039	\$200,720	(\$645,319)	-76%
		. ,	• •	χ., , , ,	
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INDATIONS CHARGES	£2.670.020	<b>#</b> 000 574	(\$0.00E.4CE)	040/
	TOTAL INPATIENT CHARGES TOTAL INPATIENT PAYMENTS	\$3,679,039	\$693,574	(\$2,985,465)	-81%
	TOTAL INPATIENT PATMENTS  TOTAL OUTPATIENT CHARGES	\$1,653,364	\$290,987 \$3,348,606	(\$1,362,377)	-82% -74%
	TOTAL OUTPATIENT CHARGES  TOTAL OUTPATIENT PAYMENTS	\$12,598,916 \$3,315,979	\$3,318,606	(\$9,280,310) (\$2,496,422)	-74% -75%
	TOTAL DISCHARGES	506	\$819,557 81	, , ,	-84%
	TOTAL DISCHARGES TOTAL PATIENT DAYS	1,274	219	(425) (1,055)	-83%
	TOTAL PATIENT DATS  TOTAL OUTPATIENT VISITS	1,214	219	(1,033)	-03 /0
	(EXCLUDES ED VISITS)	10,140	2.387	(7,753)	-76%
	TOTAL EMERGENCY DEPARTMENT	10,140	2,301	(1,133)	-10/0
	OUTPATIENT VISITS	7,603	1,964	(5,639)	-74%
	TOTAL EMERGENCY DEPARTMENT	1,000	1,504	(0,000)	1 -1 /0
	INPATIENT ADMISSIONS	139	95	(44)	-32%
	TOTAL INPATIENT & OUTPATIENT		33	(-1-1)	<b>52</b> 70
	CHARGES	\$16,277,955	\$4,012,180	(\$12,265,775)	-75%
	TOTAL INPATIENT & OUTPATIENT	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,: -=,: 50	(, ,,	
	I O I AL INI A I LINI A OO II A I LINI				

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE

		IMUNITY MEMORIAL HO			
	TWELVE	MONTHS ACTUAL FILIN	NG		
		FISCAL YEAR 2012			
	REPORT 300 - HOSPI	TAL BALANCE SHEET I	NFORMATION		
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT <u>DIFFERENCE</u>	% <u>DIFFERENCE</u>
I.	<u>ASSETS</u>				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$2,502,682	\$4,122,969	\$1,620,287	65%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$14,881,466	\$20,670,040	\$5,788,574	39%
4	Current Assets Whose Use is Limited for Current Liabilities	\$760.064	¢654.006	(¢407.270)	1.40
<u>4</u> 5	Due From Affiliates	\$762,364	\$654,986	(\$107,378) \$545,398	-14%
_ 5 _ 6	Due From Third Party Payers	\$170,422 \$0	\$715,820 \$0	\$045,396 \$0	320%
7	Inventories of Supplies	\$1,113,332	\$1,105,978	(\$7,354)	-1%
8	·	\$839,664	\$1,105,976	(\$692,076)	-17
9	Prepaid Expenses Other Current Assets	\$1,506,027	\$3,680,517	\$2,174,490	144%
9	Total Current Assets	\$21,775,957	\$31,097,898	\$2,174,490 \$9,321,941	43%
	Total Guitent Assets	φ21,773, <del>9</del> 37	\$31,037,030	\$9,321,941	43 /
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$2,505,394	\$2,831,893	\$326,499	13%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$1,439,934	\$1,439,934	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$1,477,742	\$1,597,574	\$119,832	8%
4	Total Noncurrent Assets Whose Use is	φ1,477,742	φ1,397,374	φ119,032	0 /
	Limited:	\$5,423,070	\$5,869,401	\$446,331	8%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$325,966	\$406,468	\$80,502	25%
7	Other Noncurrent Assets	\$2,036,739	\$3,123,242	\$1,086,503	53%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$101,775,114	\$104,401,288	\$2,626,174	3%
2	Less: Accumulated Depreciation	\$66,982,063	\$70,034,957	\$3,052,894	\$0
	Property, Plant and Equipment, Net	\$34,793,051	\$34,366,331	(\$426,720)	-1%
3	Construction in Progress	\$2,014,711	\$5,279,793	\$3,265,082	162%
	Total Net Fixed Assets	\$36,807,762	\$39,646,124	\$2,838,362	8%
	Total Assets	\$66,369,494	\$80,143,133	\$13,773,639	21%

	WINDHAM COMMUNITY MEMORIAL HOSPITAL						
	TWELVE MONTHS ACTUAL FILING						
	FISCAL YEAR 2012						
	REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION						
(1)	(2)	(3) FY 2011	(4) FY 2012	(5) AMOUNT	(6) %		
<u>LINE</u>	<u>DESCRIPTION</u>	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE		
II.	LIABILITIES AND NET ASSETS						
A.	Current Liabilities:						
1	Accounts Payable and Accrued Expenses	\$5,823,590	\$10,158,204	\$4,334,614	74%		
2	Salaries, Wages and Payroll Taxes	\$813,367	\$1,194,930	\$381,563	47%		
3	Due To Third Party Payers	\$71,283	\$1,499,004	\$1,427,721	2003%		
4	Due To Affiliates	\$0	\$0	\$0	0%		
5	Current Portion of Long Term Debt	\$3,406,605	\$11,163,890	\$7,757,285	228%		
6	Current Portion of Notes Payable	\$367,375	\$173,906	(\$193,469)	-53%		
7	Other Current Liabilities	\$6,135,012	\$8,955,163	\$2,820,151	46%		
	Total Current Liabilities	\$16,617,232	\$33,145,097	\$16,527,865	99%		
В.	Long Term Debt:						
1	Bonds Payable (Net of Current Portion)	\$19,388,119	\$19,376,083	(\$12,036)	0%		
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%		
	Total Long Term Debt	\$19,388,119	\$19,376,083	(\$12,036)	0%		
3	Accrued Pension Liability	\$56,931,181	\$64,662,899	\$7,731,718	14%		
4	Other Long Term Liabilities	\$4,482,535	\$5,482,001	\$999,466	22%		
	Total Long Term Liabilities	\$80,801,835	\$89,520,983	\$8,719,148	11%		
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%		
C.	Net Assets:						
1	Unrestricted Net Assets or Equity	(\$35,978,450)	(\$47,943,489)	(\$11,965,039)	33%		
2	Temporarily Restricted Net Assets	\$1,318,536	\$1,453,029	\$134,493	10%		
3	Permanently Restricted Net Assets	\$3,610,341	\$3,967,513	\$357,172	10%		
	Total Net Assets	(\$31,049,573)	(\$42,522,947)	(\$11,473,374)	37%		
	Total Liabilities and Net Assets	\$66,369,494	\$80,143,133	\$13,773,639	21%		

		MONTHS ACTUAL I FISCAL YEAR 2012							
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION									
(1)	(2)	(3)	(4)	(5)	(6)				
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE				
LINE	DESCRIPTION	ACTOAL	ACTUAL	DIFFERENCE	DIFFERENCE				
A.	Operating Revenue:								
1	Total Gross Patient Revenue	\$199,383,125	\$210,150,089	\$10,766,964	5%				
2	Less: Allowances	\$110,493,786	\$116,283,387	\$5,789,601	5%				
3	Less: Charity Care	\$3,033,891	\$3,706,321	\$672,430	22%				
4	Less: Other Deductions	\$0	\$0	\$0	0%				
	Total Net Patient Revenue	\$85,855,448	\$90,160,381	\$4,304,933	5%				
5	Other Operating Revenue	\$3,044,239	\$5,761,698	\$2,717,459	89%				
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%				
	Total Operating Revenue	\$88,899,687	\$95,922,079	\$7,022,392	8%				
В.	Operating Expenses:								
1	Salaries and Wages	\$41,345,796	\$42,907,325	\$1,561,529	4%				
2	Fringe Benefits	\$16,084,939	\$15,336,446	(\$748,493)	-5%				
3	Physicians Fees	\$693,799	\$930,637	\$236,838	34%				
4	Supplies and Drugs	\$7,777,841	\$7,642,658	(\$135,183)	-2%				
5	Depreciation and Amortization	\$4,545,850	\$4,147,105	(\$398,745)	-9%				
6	Bad Debts	\$3,365,182	\$3,839,277	\$474,095	14%				
7	Interest	\$1,476,666	\$1,325,543	(\$151,123)	-10%				
8	Malpractice	\$609,350	\$659,252	\$49,902	8%				
9	Other Operating Expenses	\$16,740,066	\$19,661,874	\$2,921,808	17%				
	Total Operating Expenses	\$92,639,489	\$96,450,117	\$3,810,628	4%				
	Income/(Loss) From Operations	(\$3,739,802)	(\$528,038)	\$3,211,764	-86%				
C.	Non-Operating Revenue:								
1	Income from Investments	(\$16,806)	(\$163)	\$16,643	-99%				
2	Gifts, Contributions and Donations	\$265,347	\$698,728	\$433,381	163%				
3	Other Non-Operating Gains/(Losses)	(\$561,377)	(\$936,114)	(\$374,737)	67%				
	Total Non-Operating Revenue	(\$312,836)	(\$237,549)	\$75,287	-24%				
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$4,052,638)	(\$765,587)	\$3,287,051	-81%				
	Other Adjustments:								
	Unrealized Gains/(Losses)	(\$10,172)	\$52,251	\$62,423	-614%				
	All Other Adjustments	\$0	\$0	\$0	0%				
	Total Other Adjustments	(\$10,172)	\$52,251	\$62,423	-614%				
	Excess/(Deficiency) of Revenue Over Expenses	(\$4,062,810)	(\$713,336)	\$3,349,474	-82%				

#### WINDHAM COMMUNITY MEMORIAL HOSPITAL

#### TWELVE MONTHS ACTUAL FILING

#### FISCAL YEAR 2012

#### **REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS**

(1)	(2)	(3)	(4)	(5)	
		ACTUAL	ACTUAL	ACTUAL	
LINE	DESCRIPTION	<u>FY 2010</u>	FY 2011	FY 2012	
A.	Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$86,942,706	\$85,855,448	\$90,160,381	
2	Other Operating Revenue	2,622,664	3,044,239	5,761,698	
3	Total Operating Revenue	\$89,565,370	\$88,899,687	\$95,922,079	
4	Total Operating Expenses	91,501,818	92,639,489	96,450,117	
5	Income/(Loss) From Operations	(\$1,936,448)	(\$3,739,802)	(\$528,038)	
6	Total Non-Operating Revenue	273,628	(323,008)	(185,298)	
7	Excess/(Deficiency) of Revenue Over Expenses	(\$1,662,820)	(\$4,062,810)	(\$713,336)	
В.	Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	-2.16%	-4.22%	-0.55%	
2	Parent Corporation Non-Operating Margin	0.30%	-0.36%	-0.19%	
3	Parent Corporation Total Margin	-1.85%	-4.59%	-0.75%	
4	Income/(Loss) From Operations	(\$1,936,448)	(\$3,739,802)	(\$528,038)	
5	Total Operating Revenue	\$89,565,370	\$88,899,687	\$95,922,079	
6	Total Non-Operating Revenue	\$273,628	(\$323,008)	(\$185,298)	
7	Total Revenue	\$89,838,998	\$88,576,679	\$95,736,781	
8	Excess/(Deficiency) of Revenue Over Expenses	(\$1,662,820)	(\$4,062,810)	(\$713,336)	
C.	Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	(\$25,203,815)	(\$35,978,450)	-\$47,943,489	
2	Parent Corporation Total Net Assets	(\$19,935,723)	(\$31,049,573)	(\$42,522,947)	
3	Parent Corporation Change in Total Net Assets	\$235,599	(\$11,113,850)	(\$11,473,374)	
4	Parent Corporation Change in Total Net Assets %	98.8%	55.7%	37.0%	

#### WINDHAM COMMUNITY MEMORIAL HOSPITAL

#### TWELVE MONTHS ACTUAL FILING

#### FISCAL YEAR 2012

#### **REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS**

(1)	(2)	(3)		(4)	(5)		
		ACTUAL		ACTUAL		ACTUAL	
LINE	DESCRIPTION	FY 2010	D FY 2011			FY 2012	
D.	Liquidity Measures Summary						
1	Current Ratio	2.1	0	1.31		0.94	
2	Total Current Assets	\$22,752,84	8	\$21,775,957		\$31,097,898	
3	Total Current Liabilities	\$10,810,04	2	\$16,617,232		\$33,145,097	
4	Days Cash on Hand	1	4	10		16	
5	Cash and Cash Equivalents	\$3,314,08	1	\$2,502,682		\$4,122,969	
6	Short Term Investments		0	0		0	
7	Total Cash and Short Term Investments	\$3,314,08	1	\$2,502,682		\$4,122,969	
8	Total Operating Expenses	\$91,501,81	8	\$92,639,489		\$96,450,117	
9	Depreciation Expense	\$4,522,90	2	\$4,545,850		\$4,147,105	
10	Operating Expenses less Depreciation Expense	\$86,978,91	6	\$88,093,639		\$92,303,012	
11	Days Revenue in Patient Accounts Receivable		66	63		78	
12	Net Patient Accounts Receivable	\$ 14,090,65	6 \$	14,881,466	\$	20,670,040	
13	Due From Third Party Payers	\$1,585,71	7	\$0		\$0	
14	Due To Third Party Payers	\$	0	\$71,283		\$1,499,004	
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 15,676,37	3 \$	14,810,183	\$	19,171,036	
16	Total Net Patient Revenue	\$86,942,70	6	\$85,855,448		\$90,160,381	
17	Average Payment Period		15	69		131	
18	Total Current Liabilities	\$10,810,04	2	\$16,617,232		\$33,145,097	
19	Total Operating Expenses	\$91,501,81	8	\$92,639,489		\$96,450,117	
20	Depreciation Expense	\$4,522,9	)2	\$4,545,850		\$4,147,105	
21	Total Operating Expenses less Depreciation Expense	\$86,978,91	6	\$88,093,639		\$92,303,012	

#### WINDHAM COMMUNITY MEMORIAL HOSPITAL **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS** (1) (2) (3) (4) (5) **ACTUAL ACTUAL** ACTUAL LINE DESCRIPTION FY 2010 FY 2011 FY 2012 E. Solvency Measures Summary **Equity Financing Ratio** (29.4)(46.8)(53.1)Total Net Assets (\$19,935,723) (\$31,049,573)(\$42,522,947)Total Assets \$67,833,577 \$66,369,494 \$80,143,133 1.3 4 Cash Flow to Total Debt Ratio 9.5 6.5 Excess/(Deficiency) of Revenues Over Expenses (\$1,662,820)(\$4,062,810)(\$713,336)6 Depreciation Expense \$4,522,902 \$4,545,850 \$4,147,105 Excess of Revenues Over Expenses and Depreciation Expense \$2,860,082 \$483,040 \$3,433,769 Total Current Liabilities \$10,810,042 \$16,617,232 \$33,145,097 Total Long Term Debt \$19,435,038 \$19,388,119 \$19,376,083 10 Total Current Liabilities and Total Long Term Debt \$30,245,080 \$36,005,351 \$52,521,180 11 Long Term Debt to Capitalization Ratio (3,881.7)(166.3)(83.7)12 Total Long Term Debt \$19,376,083 \$19,435,038 \$19,388,119 13 Total Net Assets (\$19,935,723)(\$31,049,573)(\$42,522,947)

(\$500,685)

(\$11,661,454)

(\$23,146,864)

14 Total Long Term Debt and Total Net Assets

		WINDHAM COL	MMUNITY MEMOR	IAI HOSPITAI				
			MONTHS ACTUAL					
			FISCAL YEAR 20					
	REPORT 40	0 - HOSPITAL IN	PATIENT BED UTII		PARTMENT			
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
			DISCHARGES				OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	<u>DAYS</u>	# PATIENT		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	14,151	3,621	3,667	53	104	73.2%	37.3%
2	ICU/CCU (Excludes Neonatal ICU)	2,514	356	0	12	12	57.4%	57.4%
	ICO/CCO (Excludes Neonatal ICO)	2,514	330	U	12	12	37.470	37.470
	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	0	0	0	0	0	0.0%	0.0%
	TOTAL PSYCHIATRIC	0	0	0	0	0	0.0%	0.0%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	1,112	489	493	14	14	21.8%	21.8%
7	Newborn	896	396	404	8	14	30.7%	17.5%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	17,777	4,110	4,160	79	130	61.7%	37.5%
	TOTAL INPATIENT BED UTILIZATION	18,673	4,506	4,564	87	144	58.8%	35.5%
	TOTAL INPATIENT REPORTED YEAR	18,673	4,506	4,564	87	144	58.8%	35.5%
	TOTAL INPATIENT PRIOR YEAR	19,996	4,701	4,724	87	144	63.0%	38.0%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-1,323	-195	-160	0	0	-4.2%	-2.5%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-7%	-4%	-3%	0%	0%	-7%	-7%
	Total Licensed Beds and Bassinets	144						
(A) T	his number may not exceed the number of avail	able beds for ea	ch department or i	n total.				
Note	Total discharges do not include ICU/CCU patie	nts.						
	ger are morado 1907 do pario							

		MMUNITY MEMORIA MONTHS ACTUAL FISCAL YEAR 2012	FILING		
	REPORT 450 - HOSPITAL INPATIENT AN			IZATION AND FTE	6
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>
	CT Scans (A) Inpatient Scans	2,825	2.477	-348	-12%
	Outpatient Scans (Excluding Emergency Department	2,025	2,411	-340	-12/0
2	Scans)	3,503	3,506	3	0%
	Emergency Department Scans	4,417	4,965	548	12%
	Other Non-Hospital Providers' Scans (A)  Total CT Scans	0 <b>10,745</b>	, , , , , , , , , , , , , , , , , , ,	0 <b>203</b>	0% <b>2%</b>
	Total of Journs	10,140	10,540	200	270
	MRI Scans (A)				
	Inpatient Scans Outpatient Scans (Excluding Emergency Department	518	473	-45	-9%
	Scans)	3,823	3,759	-64	-2%
3	Emergency Department Scans	74	116	42	57%
	Other Non-Hospital Providers' Scans (A)  Total MRI Scans	0 <b>4,415</b>	0 <b>4,348</b>	0 - <b>67</b>	0%
	Total MRI Scans	4,415	4,348	-67	-2%
C.	PET Scans (A)				
	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
	Emergency Department Scans	0	0	0	0%
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D.	PET/CT Scans (A)				
	Inpatient Scans	7	5	-2	-29%
	Outpatient Scans (Excluding Emergency Department				
	Scans) Emergency Department Scans	119 0	136	17	14% 0%
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	126	141	15	12%
	(A) If the Hospital is not the primary provider of thes	so scans, the Hespit	tal must obtain the fi	soal voar	
	volume of each of these types of scans from the			scai year	
	ур	, p			
	Linear Accelerator Procedures				
	Inpatient Procedures Outpatient Procedures	0	0	0	0% 0%
	Total Linear Accelerator Procedures	0	0	0	0%
	Cardiac Catheterization Procedures	0		0	00/
	Inpatient Procedures Outpatient Procedures	0	0	0	0% 0%
	Total Cardiac Catheterization Procedures	0		0	0%
<b>G</b> .	<u>Cardiac Angioplasty Procedures</u> Primary Procedures	0	0	0	0%
	Elective Procedures	0			0%
	Total Cardiac Angioplasty Procedures	0		0	0%
	Electron by ciology Studies				
	Electrophysiology Studies Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
l.	Surgical Procedures				
	Inpatient Surgical Procedures	1,284	1,242	-42	-3%
2	Outpatient Surgical Procedures	5,200	5,220	20	0%
	Total Surgical Procedures	6,484	6,462	-22	0%
J.	Endoscopy Procedures				
<u> </u>			İ		

	WINDHAM CO	MMUNITY MEMORIAL	HOSPITAL					
	TWELVE	MONTHS ACTUAL FI	LING					
		FISCAL YEAR 2012						
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTES								
(1)	(2)	(3)	(4)	(5)	(6)			
		ACTUAL	ACTUAL	AMOUNT	%			
<b>LINE</b>	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE			
1	Inpatient Endoscopy Procedures	1,187	873	-314	-26%			
2	Outpatient Endoscopy Procedures	3,200	3,285	85	3%			
	Total Endoscopy Procedures	4,387	4,158	-229	-5%			
K.	Hospital Emergency Room Visits							
<u>n.</u> 1	Hospital Emergency Room Visits Emergency Room Visits: Treated and Admitted	3,378	3,244	-134	-4%			
		3,378	,					
2	Emergency Room Visits: Treated and Discharged		33,618	2,874	9% <b>8%</b>			
	Total Emergency Room Visits	34,122	36,862	2,740	6%			
L.	Hospital Clinic Visits							
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%			
2	Dental Clinic Visits	0	0	0	0%			
3	Psychiatric Clinic Visits	0	0	0	0%			
4	Medical Clinic Visits	0	0	0	0%			
5	Specialty Clinic Visits	2,866	3,365	499	17%			
	Total Hospital Clinic Visits	2,866	3,365	499	17%			
М.	Other Hospital Outpatient Visits							
1	Rehabilitation (PT/OT/ST)	17,964	20,026	2,062	11%			
2	Cardiology	1,743	1,587	-156	-9%			
3	Chemotherapy	214	260	46	21%			
4	Gastroenterology	2	0	-2	-100%			
5	Other Outpatient Visits	104,374	98,064	-6,310	-6%			
	Total Other Hospital Outpatient Visits	124,297	119,937	-4,360	-4%			
N.	Hospital Full Time Equivalent Employees							
1	Total Nursing FTEs	208.6	179.4	-29.2	-14%			
2	Total Physician FTEs	9.3	11.4	2.1	23%			
3	Total Non-Nursing and Non-Physician FTEs	389.6	410.8	21.2	5%			
_	Total Hospital Full Time Equivalent Employees	607.5	601.6	-5.9	-1%			

	WINDHAM COMMUNITY	MEMORIAL HO	OSPITAL					
	TWELVE MONTHS	S ACTUAL FILIN	IG					
	FISCAL	YEAR 2012						
REP	ORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOS	SCOPY AND EM	<b>ERGENCY RO</b>	OM SERVICES	BY LOCATION			
(1)	(2)	(3)	(4)	(5)	(6)			
		ACTUAL	ACTUAL	AMOUNT	%			
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE			
Α.	Outpatient Surgical Procedures							
<del>A.</del> 1	Windham Hospital	5.200	5.220	20	0%			
	Total Outpatient Surgical Procedures(A)	5,200 <b>5.200</b>	5,220	20	0%			
	Total Outpatient Surgical Procedures(A)	3,200	3,220	20	070			
B.	Outpatient Endoscopy Procedures							
1	Windham Hospital	3,200	3,285	85	3%			
	Total Outpatient Endoscopy Procedures(B)	3,200	3,285	85	3%			
C.	Outpatient Hospital Emergency Room Visits							
1	Windham Hospital	30.744	33.618	2.874	9%			
	Total Outpatient Hospital Emergency Room Visits(	30,744	33,618	2,874	9%			
	(A) Must agree with Total Outpatient Surgical Procedu	res on Report 4	50.					
		_						
	(B) Must agree with Total Outpatient Endoscopy Proce	edures on Repo	rt 450.		Т			
	(C) Must agree with Emergency Room Visits Treated a	nd Discharged	on Report 450					
	(-,							

FISCAL YEAR 2012

### REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT

DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
DATA BY MA IOR PAYER CATEGORY				
PATA BT WIAGONT ATEN CATEGONT				
<u>IEDICARE</u>				
EDICARE INPATIENT				
IPATIENT ACCRUED CHARGES	\$43,834,404	\$43,219,561	(\$614,843)	-1%
IPATIENT ACCRUED PAYMENTS (IP PMT)	\$26,334,949	\$27,984,408	\$1,649,459	6%
IPATIENT PAYMENTS / INPATIENT CHARGES	60.08%	64.75%	4.67%	8%
ISCHARGES	2,372	2,326	(46)	-2%
ASE MIX INDEX (CMI)	1.27280	1.37894	0.10614	8%
ASE MIX ADJUSTED DISCHARGES (CMAD)	3,019.08160	3,207.41444	188.33284	6%
IPATIENT ACCRUED PAYMENT / CMAD	\$8,722.83	\$8,724.91	\$2.08	0%
ATIENT DAYS	12,400	11,749	(651)	-5%
IPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,123.79	\$2,381.85	\$258.07	12%
VERAGE LENGTH OF STAY	5.2	5.1	(0.2)	-3%
EDICARE OUTPATIENT				
UTPATIENT ACCRUED CHARGES (OP CHGS)	\$38,425,421	\$43,352,416	\$4,926,995	13%
	\$9,474,163	\$9,817,895	\$343,732	4%
	24.66%	22.65%	-2.01%	-8%
UTPATIENT CHARGES / INPATIENT CHARGES	87.66%	100.31%	12.65%	14%
UTPATIENT EQUIVALENT DISCHARGES (OPED)	2,079.30507	2,333.15002	253.84495	12%
UTPATIENT ACCRUED PAYMENTS / OPED	\$4,556.41	\$4,208.00	(\$348.41)	-8%
EDICARE TOTALS (INPATIENT + OUTPATIENT)				
	\$82,259,825	\$86,571,977	\$4,312,152	5%
	\$35,809,112	\$37,802,303	+ /,	6%
OTAL ALLOWANCES	\$46,450,713	\$48,769,674	\$2,318,961	5%
	EDICARE  EDICARE INPATIENT PATIENT ACCRUED CHARGES PATIENT ACCRUED PAYMENTS (IP PMT) PATIENT ACCRUED PAYMENTS (IP PMT) PATIENT PAYMENTS / INPATIENT CHARGES SCHARGES ASE MIX INDEX (CMI) ASE MIX ADJUSTED DISCHARGES (CMAD) PATIENT ACCRUED PAYMENT / CMAD ATIENT DAYS PATIENT ACCRUED PAYMENT / PATIENT DAY /ERAGE LENGTH OF STAY  EDICARE OUTPATIENT JTPATIENT ACCRUED PAYMENTS (OP CHGS) JTPATIENT ACCRUED PAYMENTS (OP PMT) JTPATIENT PAYMENTS / OUTPATIENT CHARGES JTPATIENT CHARGES / INPATIENT CHARGES JTPATIENT ACCRUED PAYMENTS / OPED	EDICARE	FY 2011   FY 2012	FY 2011   FY 2012   DIFFERENCE

REPORT 500 34 of 56 9/11/2013, 9:55 AM

FISCAL YEAR 2012

### REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS							
		ACTUAL	ACTUAL	AMOUNT	%			
IINF	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE			
LIIVE	DECORAL TION		1 1 2012	DITTERENCE	DIFFERENCE			
B.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)							
	NON-GOVERNMENT INPATIENT							
1	INPATIENT ACCRUED CHARGES	\$16,693,012	\$15,063,185	(\$1,629,827)	-10%			
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$9,413,815	\$9,212,630	(\$201,185)	-2%			
3	INPATIENT PAYMENTS / INPATIENT CHARGES	56.39%	61.16%	4.77%	8%			
4	DISCHARGES	1,256	1,178	(78)	-6%			
5	CASE MIX INDEX (CMI)	0.96200	0.95456	(0.00744)	-1%			
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,208.27200	1,124.47168	(83.80032)	-7%			
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,791.14	\$8,192.85	\$401.71	5%			
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	\$931.70	\$532.06	(\$399.64)	-43%			
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,125,742	\$598,286	(\$527,455)	-47%			
10	PATIENT DAYS	3,966	3,656	(310)	-8%			
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,373.63	\$2,519.87	\$146.24	6%			
12	AVERAGE LENGTH OF STAY	3.2	3.1	(0.1)	-2%			
				(0.17)	_,,			
	NON-GOVERNMENT OUTPATIENT							
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$60,237,644	\$65,413,680	\$5,176,036	9%			
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$26,079,746	\$27,691,135	\$1,611,389	6%			
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	43.29%	42.33%	-0.96%	-2%			
16	OUTPATIENT CHARGES / INPATIENT CHARGES	360.86%	434.26%		20%			
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4.532.34448	5.115.60570	583.26122	13%			
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,754.14	\$5,413.07	(\$341.07)	-6%			
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$1,197.73)	(\$1,205.07)	(\$7.34)	1%			
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$5,428,534)	(\$6,164,667)	(\$736,133)	14%			
20	OUT ATIENT OF EX ENUIT (OVER) / ONDER! ATMENT	(\$3,420,334)	(\$0,104,007)	(\$730,133)	1470			
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)							
21	TOTAL ACCRUED CHARGES	\$76,930,656	\$80,476,865	\$3,546,209	5%			
22	TOTAL ACCRUED PAYMENTS	\$35,493,561	\$36,903,765	\$1,410,204	4%			
23	TOTAL ALLOWANCES	\$41,437,095	\$43,573,100	\$2,136,005	5%			
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$4,302,792)	(\$5,566,381)	(\$1,263,589)	29%			
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA							
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$70,584,617	\$72,963,986	\$2,379,369	3%			
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$35,324,347	\$36,836,135	\$1,511,788	4%			
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)							
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,260,270	\$36,127,851	\$867,581	2%			
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.95%	49.51%	-0.44%				

REPORT 500 35 of 56 9/11/2013, 9:55 AM

FISCAL YEAR 2012

### REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	LININGUEED INDATIENT				
	UNINSURED INPATIENT INPATIENT ACCRUED CHARGES	\$952,163	\$751,105	(\$201,058)	-21%
	INPATIENT ACCRUED PAYMENTS (IP PMT)			( , , ,	
	INPATIENT ACCROED PAYMENTS (IP PMT)	\$46,750	\$15,020	(\$31,730) -2.91%	-68%
	DISCHARGES	4.91%	2.00%		-59%
		66	56	(10)	-15%
	CASE MIX INDEX (CMI)	1.05670	0.93178	(0.12492)	-12%
	CASE MIX ADJUSTED DISCHARGES (CMAD)	69.74220	52.17968	(17.56252)	-25%
	INPATIENT ACCRUED PAYMENT / CMAD	\$670.33	\$287.85	(\$382.47)	-57%
	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$7,120.81	\$7,905.00	\$784.19	11%
	MEDICARE - UNINSURED IP PMT / CMAD	\$8,052.51	\$8,437.06	\$384.55	5%
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$561,600	\$440,243	(\$121,357)	-22%
	PATIENT DAYS	220	156	(64)	-29%
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$212.50	\$96.28	(\$116.22)	-55%
13	AVERAGE LENGTH OF STAY	3.3	2.8	(0.5)	-16%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$3,740,586	\$4,287,134	\$546,548	15%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$122,464	\$108,762	(\$13,702)	-11%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	3.27%	2.54%	-0.74%	-23%
	OUTPATIENT CHARGES / INPATIENT CHARGES	392.85%	570.78%	177.93%	45%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	259.28195	319.63508	60.35313	23%
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$472.32	\$340.27	(\$132.05)	-28%
	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$5,281.82	\$5,072.80	(\$209.02)	-4%
	MEDICARE - UNINSURED OP PMT / OPED	\$4,084.09	\$3,867.73	(\$216.36)	-5%
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,058,930	\$1,236,262	\$177,332	17%
	, ,				
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$4,692,749	\$5,038,239	\$345,490	7%
24	TOTAL ACCRUED PAYMENTS	\$169,214	\$123,782	(\$45,432)	-27%
25	TOTAL ALLOWANCES	\$4,523,535	\$4,914,457	\$390,922	9%
00	TOTAL UPDED LIMIT (OVED) (UNDERDAYMENT	Ø4 000 500	\$4.070.F0F	AFF 07F	000
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,620,530	\$1,676,505	\$55,975	3%

REPORT 500 36 of 56 9/11/2013, 9:55 AM

# FISCAL YEAR 2012 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
	INPATIENT ACCRUED CHARGES	\$11,264,038	\$10,264,076	(\$999,962)	-9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$4,163,615	\$4,320,933	\$157,318	4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	36.96%	42.10%	5.13%	14%
4	DISCHARGES	1,035	970	(65)	-6%
	CASE MIX INDEX (CMI)	0.89670	0.91643	0.01973	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	928.08450	888.93710	(39.14740)	-4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,486.25	\$4,860.79	\$374.54	8%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$3,304.89	\$3,332.07	\$27.17	1%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$4,236.59	\$3,864.13	(\$372.46)	-9%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,931,912	\$3,434,965	(\$496,948)	-13%
11	PATIENT DAYS	3,525	3,155	(370)	-10%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,181.17	\$1,369.55	\$188.38	16%
13	AVERAGE LENGTH OF STAY	3.4	3.3	(0.2)	-4%
	MEDICAID OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$27,879,540	\$31,726,377	\$3,846,837	14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$6,706,228	\$7,607,868	\$901,640	13%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.05%	23.98%	-0.07%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	247.51%	309.10%	61.59%	25%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,561.72111	2.998.28116	436,56005	17%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,617.86	\$2,537.41	(\$80.45)	-3%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$3,136.28	\$2,875.66	(\$260.62)	-8%
21	MEDICARE - MEDICAID OP PMT / OPED	\$1,938.55	\$1,670.59	(\$267.96)	-14%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,966,019	\$5,008,899	\$42,879	1%
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$39,143,578	\$41,990,453	\$2,846,875	7%
24	TOTAL ACCRUED PAYMENTS	\$10,869,843	\$11,928,801	\$1,058,958	10%
25	TOTAL ALLOWANCES	\$28,273,735	\$30,061,652	\$1,787,917	6%
20		Ψ20,213,133	ψ50,001,052	ψ1,101,911	0 /0
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,897,932	\$8,443,864	(\$454,068)	-5%
			, .,	(* - ,===)	

REPORT 500 37 of 56 9/11/2013, 9:55 AM

FISCAL YEAR 2012

### REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$313,592	\$181,321	(\$132,271)	-42%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$118,590	\$43,905	(\$74,685)	-63%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	37.82%	24.21%	-13.60%	-36%
4	DISCHARGES	20	15	(5)	-25%
5	CASE MIX INDEX (CMI)	0.68677	1.06624	0.37947	55%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	13.73540	15.99360	2.25820	16%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,633.89	\$2,745.16	(\$5,888.73)	-68%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	(\$842.76)	\$5,447.69	\$6,290.45	-746%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$88.94	\$5,979.75	\$5,890.81	6623%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,222	\$95,638	\$94,416	7729%
11	PATIENT DAYS	70	47	(23)	-33%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,694.14	\$934.15	(\$759.99)	-45%
13	AVERAGE LENGTH OF STAY	3.5	3.1	(0.4)	-10%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$180,466	\$258,122	\$77,656	43%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$28,274	\$30,210	\$1,936	7%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	15.67%	11.70%	-3.96%	-25%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	57.55%	142.36%	84.81%	147%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	11.50960	21.35346	9.84385	86%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,456.56	\$1,414.76	(\$1,041.80)	-42%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$3,297.58	\$3,998.31	\$700.73	21%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$2,099.85	\$2,793.24	\$693.39	33%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$24,168	\$59,645	\$35,477	147%
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$494.058	\$439.443	(\$54.615)	-11%
24	TOTAL ACCRUED PAYMENTS	\$146.864	\$74.115	(\$72,749)	-50%
25	TOTAL ALLOWANCES	\$347,194	\$365,328	\$18,134	5%

REPORT 500 38 of 56 9/11/2013, 9:55 AM

#### FISCAL YEAR 2012

	REPORT FORM 500 - CALCULATION	N OF DSH UPPER I	PAYMENT LII	MIT	
	AND BASELINE UNDERPAYMENT	DATA: COMPARAT	IVE ANALYS	IS	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDIC	AL ASSISTANCE)			
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$11,577,630	\$10,445,397	(\$1,132,233)	-10%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$4,282,205	\$4,364,838	\$82,633	2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	36.99%	41.79%	4.80%	13%
4	DISCHARGES	1,055	985	(70)	-7%
5	CASE MIX INDEX (CMI)	0.89272	0.91871	0.02599	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	941.81990	904.93070	(36.88920)	-4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,546.73	\$4,823.39	\$276.66	6%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,244.40	\$3,369.46	\$125.05	4%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$4,176.10	\$3,901.52	(\$274.58)	-7%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,933,134	\$3,530,603	(\$402,532)	-10%
11	PATIENT DAYS	3,595	3,202	(393)	-11%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,191.16	\$1,363.16	\$172.00	14%
13	AVERAGE LENGTH OF STAY	3.4	3.3	(0.2)	-5%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$28,060,006	\$31,984,499	\$3,924,493	14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$6,734,502	\$7,638,078	\$903,576	13%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.00%	23.88%	-0.12%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	242.36%	306.21%	63.84%	26%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,573.23071	3,019.63462	446.40390	17%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,617.14	\$2,529.47	(\$87.67)	-3%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,137.00	\$2,883.60	(\$253.40)	-8%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$1,939.27	\$1,678.53	(\$260.74)	-13%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,990,188	\$5,068,544	\$78,356	2%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$39,637,636	\$42,429,896	\$2,792,260	7%
24	TOTAL ACCRUED PAYMENTS	\$11,016,707	\$12,002,916	\$986,209	9%
25	TOTAL ALLOWANCES	\$28,620,929	\$30,426,980	\$1,806,051	6%

REPORT 500 39 of 56 9/11/2013, 9:55 AM

## FISCAL YEAR 2012 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

	AND BASELINE UNDERPAYMENT DA	ATA: COMPARAT	IVE ANALYS	IS	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
G.	CHAMPUS / TRICARE				
	CHAMPUS / TRICARE INPATIENT				
	INPATIENT ACCRUED CHARGES	\$117,471	\$211,837	\$94,366	80%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$53,482	\$80,646	\$27,164	51%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	45.53%	38.07%	-7.46%	-16%
-	DISCHARGES	18	17	(1)	-6%
	CASE MIX INDEX (CMI)	0.58850	0.94453	0.35603	60%
	CASE MIX ADJUSTED DISCHARGES (CMAD)	10.59300	16.05701	5.46401	52%
	INPATIENT ACCRUED PAYMENT / CMAD	\$5,048.81	\$5,022.48	(\$26.33)	-1%
	PATIENT DAYS	35	66	31	89%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,528.06	\$1,221.91	(\$306.15)	-20%
10	AVERAGE LENGTH OF STAY	1.9	3.9	1.9	100%
	CHAMPUS / TRICARE OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$437,537	\$459,513	\$21,976	5%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$134,184	\$115,885	(\$18,299)	-14%
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)				
13	TOTAL ACCRUED CHARGES	\$555,008	\$671,350	\$116,342	21%
14	TOTAL ACCRUED PAYMENTS	\$187,666	\$196,531	\$8,865	5%
15	TOTAL ALLOWANCES	\$367,342	\$474,819	\$107,477	29%
Н.	OTHER DATA				
1	OTHER OPERATING REVENUE	\$3,044,239	\$5,761,698	\$2,717,459	89%
2	TOTAL OPERATING EXPENSES	\$92,639,489	\$96,450,117	\$3,810,628	4%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)				
4	CHARITY CARE (CHARGES)	\$2,956,537	\$3,573,641	\$617,104	21%
	BAD DEBTS (CHARGES)	\$3,100,374	\$3,254,865	\$154,491	5%
	UNCOMPENSATED CARE (CHARGES)	\$6,056,911	\$6,828,506	\$771,595	13%
	COST OF UNCOMPENSATED CARE	\$2,508,770	\$2,843,024	\$334,254	13%
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)				
8	TOTAL ACCRUED CHARGES	\$39,637,636	\$42,429,896	\$2,792,260	7%
	TOTAL ACCRUED PAYMENTS	\$11,016,707	\$12,002,916	\$986,209	9%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$16,417,891	\$17,665,534	\$1,247,643	8%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$5,401,184	\$5,662,618	\$261,434	5%

REPORT 500 40 of 56 9/11/2013, 9:55 AM

FISCAL YEAR 2012

#### REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	0/
				AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
	ACCRECATE DATA				
II.	AGGREGATE DATA				
	TOTALS - ALL PAYERS				
	TOTAL INPATIENT CHARGES	\$72,222,517	\$68,939,980	(\$3,282,537)	-5%
	TOTAL INPATIENT CHARGES TOTAL INPATIENT PAYMENTS	\$40,084,451	\$41,642,522	\$1,558,071	-5% 4%
	TOTAL INPATIENT PAYMENTS / CHARGES	55.50%	60.40%	4.90%	9%
	TOTAL DISCHARGES	4,701	4,506	4.90% (195)	-4%
	TOTAL DISCHARGES TOTAL CASE MIX INDEX	1.10184	1.16575	0.06391	-4%
6	TOTAL CASE MIX INDEX TOTAL CASE MIX ADJUSTED DISCHARGES	5,179.76650	5,252.87383	73.10733	1%
-	TOTAL CASE MIX ADJUSTED DISCHARGES  TOTAL OUTPATIENT CHARGES	-		\$14,049,500	11%
	OUTPATIENT CHARGES / INPATIENT CHARGES	\$127,160,608	\$141,210,108	\$14,049,500 28.76%	
-	TOTAL OUTPATIENT PAYMENTS	176.07% \$42.422.595	204.83% \$45,262,993	\$2,840,398	16% 7%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	* / /	32.05%	\$2,840,398 -1.31%	-4%
	TOTAL CHARGES	33.36%			
	TOTAL CHARGES TOTAL PAYMENTS	\$199,383,125 \$82,507,046	\$210,150,088 \$86,905,515	\$10,766,963 \$4,398,469	5% 5%
	TOTAL PAYMENTS / TOTAL CHARGES	** /** /*	* , ,	+ //	5% 0%
	PATIENT DAYS	41.38%	41.35%	-0.03%	
14	PATIENT DAYS	19,996	18,673	(1,323)	-7%
В.	TOTALS - ALL GOVERNMENT PAYERS				
1	INPATIENT CHARGES	\$55,529,505	\$53,876,795	(\$1,652,710)	-3%
2	INPATIENT PAYMENTS	\$30,670,636	\$32,429,892	\$1,759,256	6%
	GOVT. INPATIENT PAYMENTS / CHARGES	55,23%	60.19%	4.96%	9%
4	DISCHARGES	3,445	3,328	(117)	-3%
5	CASE MIX INDEX	1.15283	1,24051	0.08768	8%
6	CASE MIX ADJUSTED DISCHARGES	3,971.49450	4,128.40215	156.90765	4%
7	OUTPATIENT CHARGES	\$66,922,964	\$75,796,428	\$8,873,464	13%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	120.52%	140.68%	20.17%	17%
9	OUTPATIENT PAYMENTS	\$16.342.849	\$17,571,858	\$1,229,009	8%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.42%	23.18%	-1.24%	-5%
	TOTAL CHARGES	\$122,452,469	\$129,673,223	\$7,220,754	6%
	TOTAL PAYMENTS	\$47,013,485	\$50,001,750	\$2,988,265	6%
	TOTAL PAYMENTS / CHARGES	38.39%	38.56%	0.17%	0%
	PATIENT DAYS	16,030	15,017	(1,013)	-6%
	TOTAL GOVERNMENT DEDUCTIONS	\$75,438,984	\$79,671,473	\$4.232.489	6%
-10	TOTAL COVERNMENT BEBOOTIONS	ψ10,400,004	φιο,σιι,4ισ	ψ1,202,100	070
C.	AVERAGE LENGTH OF STAY				
1	MEDICARE	5.2	5.1	(0.2)	-3%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.2	3.1	(0.1)	-2%
	UNINSURED	3.3	2.8	(0.5)	-16%
4	MEDICAID	3.4	3.3	(0.2)	-4%
5	OTHER MEDICAL ASSISTANCE	3.5	3.1	(0.4)	-10%
6	CHAMPUS / TRICARE	1.9	3.9	1.9	100%
7	TOTAL AVERAGE LENGTH OF STAY	4.3	4.1	(0.1)	-3%

REPORT 500 41 of 56 9/11/2013, 9:55 AM

FISCAL YEAR 2012

## REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION				
1	TOTAL CHARGES	\$199,383,125	\$210,150,088	\$10,766,963	5%
2	TOTAL GOVERNMENT DEDUCTIONS	\$75,438,984	\$79,671,473	\$4,232,489	69
3	UNCOMPENSATED CARE	\$6,056,911	\$6,828,506	\$771,595	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,260,270	\$36,127,851	\$867,581	29
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$42,560	\$27,028	(\$15,532)	-369
6	TOTAL ADJUSTMENTS	\$116,798,725	\$122,654,858	\$5,856,133	5%
7	TOTAL ACCRUED PAYMENTS	\$82,584,400	\$87,495,230	\$4,910,830	69
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	09
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$82,584,400	\$87,495,230	\$4,910,830	69
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4141995467	0.4163463876	0.0021468409	19
11	COST OF UNCOMPENSATED CARE	\$2,508,770	\$2,843,024	\$334,254	139
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$5,401,184	\$5,662,618	\$261,434	59
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	09
14	TOTAL COST OF UNCOMPENSATED CARE AND		·		
	MEDICAL ASSISTANCE UNDERPAYMENT	\$7,909,954	\$8,505,642	\$595,688	89
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$4,966,019	\$5,008,899	\$42,879	19
2	OTHER MEDICAL ASSISTANCE	\$25,390	\$155,283	\$129,893	5129
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,620,530	\$1,676,505	\$55,975	39
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$6,611,940	\$6,840,687	\$228,748	39
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600				
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$79,148	\$49,956	(\$29,192)	-36.88%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$3,348,402	\$3,254,865	(\$93,537)	-2.79%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$85,855,448	\$90,160,381	\$4,304,933	5.01%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0,100,381	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$199,383,125	\$210,150,089	\$10,766,964	5.40%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$342,162	\$717,092	\$374,930	109.58%
7	UNCOMP, CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$6,399,073	\$7,545,598	\$1,146,525	17.92%

REPORT 500 42 of 56 9/11/2013, 9:55 AM

-	WINDHAM COMMUNITY MEMORIAL HOSI	PITAL		
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYN	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
40	49	(0)	(0)	(5)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	<u>DESCRIPTION</u>	FY 2011	FY 2012	DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS			
	INPATIENT ACCRUED CHARGES   NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$16,693,012	\$15,063,185	(\$1,629,827)
	MEDICARE	\$43,834,404	43,219,561	(\$614,843)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$11,577,630	10,445,397	(\$1,132,233)
	OTHER MEDICAL ASSISTANCE	\$11,264,038 \$313,592	10,264,076 181,321	(\$999,962) (\$132,271)
	CHAMPUS / TRICARE	\$117,471	211,837	\$94,366
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT CHARGES	\$952,163 <b>\$55,529,505</b>	751,105 <b>\$53,876,795</b>	(\$201,058) <b>(\$1,652,710)</b>
	TOTAL INPATIENT CHARGES	\$72,222,517	\$68,939,980	(\$3,282,537)
В.	OUTPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$60,237,644	\$65,413,680	\$5,176,036
	MEDICARE	\$38,425,421	43,352,416	\$4,926,995
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$28,060,006 \$27,879,540	31,984,499 31,726,377	\$3,924,493 \$3,846,837
5	OTHER MEDICAL ASSISTANCE	\$180,466	258,122	\$77,656
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$437,537 \$3,740,586	459,513 4,287,134	\$21,976 \$546,548
<u> </u>	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$66,922,964	\$75,796,428	\$8,873,464
	TOTAL OUTPATIENT CHARGES	\$127,160,608	\$141,210,108	\$14,049,500
C.	TOTAL ACCRUED CHARGES			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$76,930,656	\$80,476,865	\$3,546,209
3	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$82,259,825 \$39,637,636	\$86,571,977 \$42,429,896	\$4,312,152 \$2,792,260
4	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$39,143,578	\$41,990,453	\$2,846,875
5	TOTAL OTHER MEDICAL ASSISTANCE	\$494,058	\$439,443	(\$54,615)
7	TOTAL CHAMPUS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$555,008 \$4,692,749	\$671,350 \$5,038,239	\$116,342 \$345,490
	TOTAL GOVERNMENT CHARGES	\$122,452,469	\$129,673,223	\$7,220,754
	TOTAL CHARGES	\$199,383,125	\$210,150,088	\$10,766,963
D.	INPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,413,815	\$9,212,630	(\$201,185)
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$26,334,949 \$4,282,205	27,984,408 4,364,838	\$1,649,459 \$82,633
4	MEDICAID	\$4,163,615	4,320,933	\$157,318
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$118,590 \$53,482	43,905 80,646	(\$74,685) \$27,164
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$46,750	15,020	(\$31,730)
-	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$30,670,636	\$32,429,892	\$1,759,256 \$1,559,071
	TOTAL INPATIENT PAYMENTS	\$40,084,451	\$41,642,522	\$1,558,071
	OUTPATIENT ACCRUED PAYMENTS	#00 070 T.	#07.001.105	<b>M4.044.00</b>
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$26,079,746 \$9,474,163	\$27,691,135 9.817.895	\$1,611,389 \$343.732
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,734,502	7,638,078	\$903,576
	MEDICAID OTHER MEDICAL ASSISTANCE	\$6,706,228 \$28,274	7,607,868 30,210	\$901,640 \$1,936
	CHAMPUS / TRICARE	\$134,184	115,885	(\$18,299)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$122,464	108,762	(\$13,702)
-	TOTAL OUTPATIENT GOVERNMENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$16,342,849 \$42,422,595	\$17,571,858 \$45,262,993	\$1,229,009 \$2,840,398
		Ţ :=, : <b>==</b> ;::0	, , ,	<del>-</del> ,,0
<b>F.</b>	TOTAL ACCRUED PAYMENTS TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$35,493,561	\$36,903,765	\$1,410,204
2	TOTAL MEDICARE	\$35,809,112	\$37,802,303	\$1,993,191
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) TOTAL MEDICAID	\$11,016,707 \$10,869,843	\$12,002,916 \$11,928,801	\$986,209 \$1,058,958
	TOTAL MEDICAID  TOTAL OTHER MEDICAL ASSISTANCE	\$10,869,843	\$74,115	(\$72,749)
6	TOTAL CHAMPUS / TRICARE	\$187,666	\$196,531	\$8,865
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)  TOTAL GOVERNMENT PAYMENTS	\$169,214 <b>\$47,013,485</b>	\$123,782 <b>\$50,001,750</b>	(\$45,432) \$2,988,265
	TOTAL PAYMENTS	\$82,507,046	\$86,905,515	\$4,398,469

	WINDHAM COMMUNITY MEMORIAL HOSE	PITAL		
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYN	IENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA	I I		
(1)	(2)	(3)	(4)	(5)
\ <u>''</u>	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE
<u> </u>	DAVED MIX			
111.	PAYER MIX			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8.37%	7.17%	-1.20%
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	21.99% 5.81%	20.57% 4.97%	-1.42% -0.84%
	MEDICALD	5.65%	4.88%	-0.77%
5	OTHER MEDICAL ASSISTANCE	0.16%	0.09%	-0.07%
	CHAMPUS / TRICARE	0.06%	0.10%	0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYER MIX	0.48% <b>27.85%</b>	0.36% <b>25.64%</b>	-0.12% <b>-2.21%</b>
	TOTAL INPATIENT GOVERNMENT PATER WILK	36.22%	32.81%	-3.42%
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	30.21%	31.13%	0.92%
	MEDICARE	19.27%	20.63%	1.36%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14.07%	15.22%	1.15%
	MEDICAID	13.98%	15.10%	1.11%
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.09% 0.22%	0.12% 0.22%	0.03% 0.00%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.88%	2.04%	0.00%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	33.57%	36.07%	2.50%
	TOTAL OUTPATIENT PAYER MIX	63.78%	67.19%	3.42%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
	TOTAL FATER WITH BASED ON ACCROED CHARGES	100.00 /8	100.00 /8	0.00 /8
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
<u> </u>	NON CONTENT (NO LUDINO CEL E DIVY (UNINO UDED)	44.440	40.000/	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	11.41% 31.92%	10.60% 32.20%	-0.81% 0.28%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.19%	5.02%	-0.17%
4	MEDICAID	5.05%	4.97%	-0.07%
	OTHER MEDICAL ASSISTANCE	0.14%	0.05%	-0.09%
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.06% 0.06%	0.09% 0.02%	0.03% -0.04%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	37.17%	37.32%	0.14%
	TOTAL INPATIENT PAYER MIX	48.58%	47.92%	-0.67%
<u></u>	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
D.	OUTPATIENT PATER WIX BASED ON ACCRUED PATMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	31.61%	31.86%	0.25%
	MEDICARE	11.48%	11.30%	-0.19%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.16%	8.79% 8.75%	0.63%
	MEDICAID OTHER MEDICAL ASSISTANCE	8.13% 0.03%	8.75% 0.03%	0.63% 0.00%
	CHAMPUS / TRICARE	0.16%	0.13%	-0.03%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.15%	0.13%	-0.02%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	19.81%	20.22%	0.41%
<b>—</b>	TOTAL OUTPATIENT PAYER MIX	51.42%	52.08%	0.67%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

	WINDHAM COMMUNITY MEMORIAL HOOS			
	WINDHAM COMMUNITY MEMORIAL HOSP TWELVE MONTHS ACTUAL FILING	ITAL		
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	<u>DESCRIPTION</u>	<u>FY 2011</u>	FY 2012	DIFFERENCE
777	DISCULAROSES DATIENT DAVE ALOS CASE MIN INDEX AND OTHER REQUIRES	DATA		
111.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DUATA		
Α.	DISCHARGES			
L_	NON COVERNMENT (INCLUDING OF FRAV / LININGURED)	4.050	4.470	(70)
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	1,256 2,372	1,178 2,326	(78) (46)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,055	985	(70)
	MEDICAID	1,035	970	(65)
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	20 18	15 17	(5) (1)
_	UNINSURED (INCLUDED IN NON-GOVERNMENT)	66	56	(10)
	TOTAL DISCHARGES	3,445	3,328	(117)
	TOTAL DISCHARGES	4,701	4,506	(195)
В.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,966	3,656	(310)
	MEDICARE	12,400	11,749	(651)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,595	3,202	(393)
	MEDICAID OTHER MEDICAL ASSISTANCE	3,525 70	3,155 47	(370)
	CHAMPUS / TRICARE	35	66	31
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	220	156	(64)
-	TOTAL GOVERNMENT PATIENT DAYS TOTAL PATIENT DAYS	16,030 19,996	15,017 18,673	(1,013) (1,323)
	TOTAL PATIENT DATS	19,990	10,073	(1,323)
C.	AVERAGE LENGTH OF STAY (ALOS)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.2	3.1	(0.1)
	MEDICARE	5.2	5.1	(0.1)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.4	3.3	(0.2)
	MEDICAID OTHER MEDICAL ASSISTANCE	3.4 3.5	3.3 3.1	(0.2)
	CHAMPUS / TRICARE	1.9	3.9	1.9
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.3	2.8	(0.5)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY TOTAL AVERAGE LENGTH OF STAY	4.7 4.3	4.5 4.1	(0.1) (0.1)
				(4)
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.96200	0.95456	(0.00744)
2	MEDICARE	1.27280	1.37894	0.10614
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	0.89272	0.91871	0.02599
	OTHER MEDICAL ASSISTANCE	0.89670 0.68677	0.91643 1.06624	0.01973 0.37947
6	CHAMPUS / TRICARE	0.58850	0.94453	0.35603
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	1.05670 <b>1.15283</b>	0.93178 <b>1.24051</b>	(0.12492) <b>0.08768</b>
	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX	1.10184	1.16575	0.06391
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$70,584,617	\$72,963,986	\$2,379,369
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,324,347	\$36,836,135	\$1,511,788
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,260,270	\$36,127,851	\$867,581
<u>4</u> 5	TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE	49.95% \$79,148	49.51% \$49,956	-0.44% (\$29,192)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$42,560	\$27,028	(\$15,532)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT	\$0	\$0	
8	ADJUSTMENT-OHCA INPUT) CHARITY CARE	\$2,956,537	\$3,573,641	\$0 \$617,104
	BAD DEBTS	\$3,100,374	\$3,254,865	\$154,491
	TOTAL UNCOMPENSATED CARE	\$6,056,911	\$6,828,506	\$771,595
	TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES	\$70,584,617 \$92,639,489	\$72,963,986 \$96,450,117	\$2,379,369 \$3,810,628
<del>- ''-</del>	TO THE OF ENVIRON EM EMOLO	ψ32,033, <del>4</del> 03	ψου,που, 117	ψυ,υτυ,υ20

	WINDHAM COMMUNITY MEMORIAL HOSF	ΡΙΤΔΙ		
	TWELVE MONTHS ACTUAL FILING	IIAL		
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	FNT I IMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2011	<u>FY 2012</u>	DIFFERENCE
TX7	DOLLLIDDED DAVMENT LIMIT CALCUL ATIONS			
17.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
Α.	CASE MIX ADJUSTED DISCHARGES			
	STOL MIN TERCOTES SIGNIFICACES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,208.27200	1,124.47168	(83.80032
	MEDICARE	3,019.08160	3,207.41444	188.33284
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	941.81990	904.93070	(36.88920
5	MEDICAID OTHER MEDICAL ASSISTANCE	928.08450 13.73540	888.93710 15.99360	(39.14740
6	CHAMPUS / TRICARE	10.59300	16.05701	5.46401
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	69.74220	52.17968	(17.56252
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	3,971.49450	4,128.40215	156.90765
	TOTAL CASE MIX ADJUSTED DISCHARGES	5,179.76650	5,252.87383	73.10733
	OUTDATIENT FOUNDALENT DISCULADOES CALCULATION (DEVENUE METHODOL COV)			
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,532.34448	5,115.60570	583.26122
2	MEDICARE	2,079.30507	2,333.15002	253.8449
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,573.23071	3,019.63462	446.40390
	MEDICAID	2,561.72111	2,998.28116	436.5600
5	OTHER MEDICAL ASSISTANCE	11.50960 67.04349	21.35346 36.87609	9.8438
7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	259.28195	319.63508	60.3531
-	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	4,719.57928	5,389.66073	670.0814
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	9,251.92376	10,505.26643	1,253.3426
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,791.14	\$8,192.85	\$401.71
	MEDICARE	\$8,722.83	\$8,724.91	\$2.08
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,546.73	\$4,823.39	\$276.66
4	MEDICAID	\$4,486.25	\$4,860.79	\$374.54
	OTHER MEDICAL ASSISTANCE	\$8,633.89	\$2,745.16	(\$5,888.73
6	CHAMPUS / TRICARE	\$5,048.81 \$670.33	\$5,022.48	(\$26.33 (\$382.47
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,722.69	\$287.85 <b>\$7,855.31</b>	\$132.62
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,738.66	\$7,927.57	\$188.91
		, ,	, ,,-	•
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
	NON COVEDNMENT (NICH LIDING OF F DAY (LINING LIDED)	фг <b>7</b> г 4 4 4	<b>⊕</b>	/ft0.4.4. 0.7
<u>1</u> 2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$5,754.14 \$4,556.41	\$5,413.07 \$4,208.00	(\$341.07 (\$348.41
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,617.14	\$2,529.47	(\$87.67
4	MEDICAID	\$2,617.86	\$2,537.41	(\$80.45
5	OTHER MEDICAL ASSISTANCE	\$2,456.56	\$1,414.76	(\$1,041.80
6	CHAMPUS / TRICARE	\$2,001.45	\$3,142.55	\$1,141.10
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$472.32	\$340.27	(\$132.05
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$3,462.78	\$3,260.29	(\$202.49
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,585.27	\$4,308.60	(\$276.67
		, .,	, .,	(+=: 5:0:

	WINDHAM COMMUNITY MEMORIAL HOS	 PITAL		
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
		<u> </u>		
(1)	(2)	(3)	(4)	(5)
		AOTHAI	ACTUAL	•
ļ,,_	DECORIDEION	ACTUAL EV 2011	ACTUAL EX 2012	AMOUNT
LINE	DESCRIPTION	FY 2011	FY 2012	<u>DIFFERENCE</u>
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	+		
	9/12/02/// 12/ 5// 2// 12// 12// 12// 12// 12/	+ +		
	MEDICAID	\$4,966,019	\$5,008,899	\$42,879
	OTHER MEDICAL ASSISTANCE	\$25,390	\$155,283	\$129,893
3	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$1,620,530	\$1,676,505	\$55,975
<u> </u>	IOTAL CALCULATED UNDERPATMENT (UPPER LIMIT METHODOLOGT)	\$6,611,940	\$6,840,687	\$228,748
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODO	JI OGV)		
V 1.	CALCULATED UNDERFATMENT BEFORE OFFER LIMIT (BASELINE METHODO	<u>ILUG1)</u>		
1	TOTAL CHARGES	\$199,383,125	\$210,150,088	\$10,766,963
	TOTAL GOVERNMENT DEDUCTIONS	\$75,438,984	\$79,671,473	\$4,232,489
_	UNCOMPENSATED CARE	\$6,056,911	\$6,828,506	\$771,595
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,260,270 \$42,560	\$36,127,851 \$27,028	\$867,581 (\$15,532)
	EMPLOYEE SELF INSURANCE ALLOWANCE TOTAL ADJUSTMENTS	\$116,798,725	\$27,028 \$122.654.858	\$5,856,133
	TOTAL ADJUSTMENTS  TOTAL ACCRUED PAYMENTS	\$82,584,400	\$87,495,230	\$4,910,830
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$82,584,400	\$87,495,230	\$4,910,830
	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4141995467	0.4163463876	0.0021468409
	COST OF UNCOMPENSATED CARE	\$2,508,770 \$5,401,184	\$2,843,024 \$5,662,618	\$334,254 \$261,434
12 13	MEDICAL ASSISTANCE UNDERPAYMENT PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$5,401,184	\$0,002,018	\$201,434
	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	*-	<b>*</b> -	7-
		\$7,909,954	\$8,505,642	\$595,688
		<del>                                     </del>		
VII.	RATIOS	<u> </u>		
		1		
	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	FC 200/	64.460/	4 770/
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	56.39% 60.08%	61.16% 64.75%	4.77% 4.67%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	36.99%	41.79%	4.80%
	MEDICAID	36.96%	42.10%	5.13%
5	OTHER MEDICAL ASSISTANCE	37.82%	24.21%	-13.60%
	CHAMPUS / TRICARE	45.53%	38.07%	-7.46%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.91%	2.00%	-2.91%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	55.000/	00.40%	4.000/
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	55.23% 55.50%	60.19% 60.40%	4.96% 4.90%
	TOTAL RATIO OF INFATIENT FATMENTS TO INFATIENT CHARGES	33.30 /0	00.70 /0	7.30 /0
	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	43.29%	42.33%	-0.96%
	MEDICARE	24.66% 24.00%	22.65%	-2.01% -0.12%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	24.05%	23.88% 23.98%	-0.12% -0.07%
	OTHER MEDICAL ASSISTANCE	15.67%	11.70%	-3.96%
	CHAMPUS / TRICARE	30.67%	25.22%	-5.45%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.27%	2.54%	-0.74%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
		24.42%	23.18%	-1.24%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	33.36%	32.05%	-1.31%

	WINDHAM COMMUNITY MEMORIAL LICOS	NT A I		
-	WINDHAM COMMUNITY MEMORIAL HOSE	TIAL		
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	
l	DECORIDATION			AMOUNT
LINE	DESCRIPTION	<u>FY 2011</u>	FY 2012	DIFFERENCE
X7111	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA	ATIONS		
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA	ATIONS		
_	DECONORIATION OF OUGA DEFINED HET DEVENUE TO HOODITAL AUDITED FIN CTATEMENT	0		
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENT	<u>s</u>		
1	TOTAL ACCRUED PAYMENTS	\$82.507.046	\$86,905,515	\$4,398,469
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.)	+==,00.,010	<del>+,,</del>	\$0
	(OHCA INPUT)	\$0	\$0	
	OHCA DEFINED NET REVENUE	\$82,507,046	\$86,905,515	\$4,398,469
_	DI LIO (MANUO) OTUED AD ILIOTAFAITO TO OLIOA DEFINED MET DE (FAILE	<b>#0.040.400</b>	<b>#0.054.005</b>	(000 507)
<u>3</u>	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE  CALCULATED NET REVENUE	\$3,348,402 <b>\$85.855.448</b>	\$3,254,865 <b>\$90,160,380</b>	(\$93,537) \$4,304,932
-	CALCULATED NET REVENUE	\$60,600,446	\$90,100,360	\$4,3U4,93Z
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$85.855.448	\$90,160,381	\$4,304,933
	REPORTING)	, , , , , , ,	, , ,	* , ,
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	(\$1)	(\$1)
			(\$1)	(\$1)
6 <b>B</b> .	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME		(\$1)	(\$1)
			(\$1) \$210,150,088	\$10,766,963
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	ENTS .		
<b>B</b> .	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE	ENTS \$199,383,125	\$210,150,088	\$10,766,963
<b>B.</b> 1 2	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE	\$199,383,125 \$0 \$199,383,125	\$210,150,088 \$0 <b>\$210,150,088</b>	\$10,766,963 \$0 <b>\$10,766,963</b>
<b>B</b> .	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$199,383,125 \$0	\$210,150,088 \$0	\$10,766,963 \$0
<b>B.</b> 1 2	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE	\$199,383,125 \$0 \$199,383,125	\$210,150,088 \$0 <b>\$210,150,088</b>	\$10,766,963 \$0 <b>\$10,766,963</b>
B. 1 2 3	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$199,383,125 \$0 \$199,383,125 \$199,383,125	\$210,150,088 \$0 <b>\$210,150,088</b> \$210,150,089	\$10,766,963 \$0 <b>\$10,766,963</b> \$10,766,964
<b>B.</b> 1 2	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$199,383,125 \$0 \$199,383,125	\$210,150,088 \$0 <b>\$210,150,088</b>	\$10,766,963 \$0 <b>\$10,766,963</b>
B. 1 2 3	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125	\$210,150,088 \$0 <b>\$210,150,088</b> \$210,150,089	\$10,766,963 \$0 <b>\$10,766,963</b> \$10,766,964
3 4 C.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1)	\$10,766,963 \$10,766,963 \$10,766,964 (\$1)
3 3 C.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1)	\$10,766,963 \$0 \$10,766,963 \$10,766,964 (\$1)
3 3 C.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1) \$6,828,506 \$717,092	\$10,766,963 \$0 \$10,766,963 \$10,766,964 (\$1) \$771,595 \$374,930
3 3 C.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1)	\$10,766,963 \$0 \$10,766,963 \$10,766,964 (\$1)
3 3 C.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1) \$6,828,506 \$717,092	\$10,766,963 \$0 \$10,766,963 \$10,766,964 (\$1) \$771,595 \$374,930
3 4 C.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME  OHCA DEFINED GROSS REVENUE  PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE  CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN  OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE  CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS \$6,056,911 \$342,162 \$6,399,073	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1) \$6,828,506 \$717,092 \$7,545,598	\$10,766,963 \$0 \$10,766,963 \$10,766,964 (\$1) \$771,595 \$374,930 \$1,146,525
8. 1 2 3 4 C. 1 2	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN  OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS \$6,056,911 \$342,162 \$6,399,073 \$6,399,073	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1) \$6,828,506 \$717,092 \$7,545,598	\$10,766,963 \$10,766,964 \$10,766,964 (\$1) \$771,595 \$374,930 \$1,146,525
8. 1 2 3 4 C. 1 2	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME  OHCA DEFINED GROSS REVENUE  PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE  CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN  OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE  CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS \$6,056,911 \$342,162 \$6,399,073	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1) \$6,828,506 \$717,092 \$7,545,598	\$10,766,963 \$0 \$10,766,963 \$10,766,964 (\$1) \$771,595 \$374,930 \$1,146,525
8. 1 2 3 4 C. 1 2	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN  OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS \$6,056,911 \$342,162 \$6,399,073 \$6,399,073	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1) \$6,828,506 \$717,092 \$7,545,598	\$10,766,963 \$10,766,964 \$10,766,964 (\$1) \$771,595 \$374,930 \$1,146,525
8. 1 2 3 4 C. 1 2	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN  OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS \$6,056,911 \$342,162 \$6,399,073 \$6,399,073	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1) \$6,828,506 \$717,092 \$7,545,598	\$10,766,963 \$10,766,964 \$10,766,964 (\$1) \$771,595 \$374,930 \$1,146,525
8. 1 2 3 4 C. 1 2	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE  GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN  OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$199,383,125 \$0 \$199,383,125 \$199,383,125 \$199,383,125 \$0 TS \$6,056,911 \$342,162 \$6,399,073 \$6,399,073	\$210,150,088 \$0 \$210,150,088 \$210,150,089 (\$1) \$6,828,506 \$717,092 \$7,545,598	\$10,766,963 \$10,766,964 \$10,766,964 (\$1) \$771,595 \$374,930 \$1,146,525

	WINDHAM COMMUNITY MEMORIAL HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND			
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES			
	DAGELINE ONDER! ATMENT DATA. ACREED OF ONT ROOLDONES			
(1)	(2)	(3)		
<del>  \                                   </del>	(2)	ACTUAL		
LINE	DESCRIPTION	FY 2012		
LINE	<u>DESCRIPTION</u>	<u>F1 2012</u>		
I.	ACCRUED CHARGES AND PAYMENTS			
1.	ACCROLD CHARGES AND FATMENTS			
	INPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$15,063,185		
2	MEDICARE	43,219,561		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,445,397		
5	MEDICAID OTHER MEDICAL ASSISTANCE	10,264,076 181,321		
	CHAMPUS / TRICARE	211,837		
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	751,105		
	TOTAL INPATIENT GOVERNMENT CHARGES	\$53,876,795		
	TOTAL INPATIENT CHARGES	\$68,939,980		
<u> </u>				
B.	OUTPATIENT ACCRUED CHARGES     NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$C5.440.000		
	MEDICARE	\$65,413,680 43.352.416		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	31,984,499		
	MEDICAID	31,726,377		
	OTHER MEDICAL ASSISTANCE	258,122		
	CHAMPUS / TRICARE	459,513		
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4,287,134		
-	TOTAL OUTPATIENT GOVERNMENT CHARGES TOTAL OUTPATIENT CHARGES	\$75,796,428		
	TOTAL OUTPATIENT CHARGES	\$141,210,108		
C.	TOTAL ACCRUED CHARGES			
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$80,476,865		
2	TOTAL GOVERNMENT ACCRUED CHARGES	129,673,223		
	TOTAL ACCRUED CHARGES	\$210,150,088		
D.	INPATIENT ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,212,630		
	MEDICARE	27,984,408		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,364,838		
4	MEDICAID	4,320,933		
5	OTHER MEDICAL ASSISTANCE	43,905		
	CHAMPUS / TRICARE	80,646		
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYMENTS	15,020 <b>\$32,429,892</b>		
-	TOTAL INPATIENT GOVERNMENT FATMENTS  TOTAL INPATIENT PAYMENTS	\$41,642,522		
	TO THE TAXABLE PARTY	Ψ-1,0-2,322		
E.	OUTPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$27,691,135		
2	MEDICARE	9,817,895		
3 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	7,638,078		
	OTHER MEDICAL ASSISTANCE	7,607,868 30,210		
	CHAMPUS / TRICARE	115,885		
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	108,762		
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$17,571,858		
	TOTAL OUTPATIENT PAYMENTS	\$45,262,993		
<u> </u>	TOTAL ACCRUED DAYMENTS			
<b>F.</b>	TOTAL ACCRUED PAYMENTS  TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$36,903,765		
2	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAT / UNINSURED)	50,001,750		
	TOTAL ACCRUED PAYMENTS	\$86,905,515		
		<del>+</del>		

	T	
	WINDHAM COMMUNITY MEMORIAL HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2012	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
\ · <i>,</i>	(-)	ACTUAL
	DESCRIPTION	
LINE	DESCRIPTION	FY 2012
⊢	ACCRUSED DIGGUARGES CAGE MIN INDEX AND CTUED DECUMED DATA	
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
Α.	ACCRUED DISCHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,178
2	MEDICARE	2,326
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	985
4	MEDICAID	970
5	OTHER MEDICAL ASSISTANCE	15
6	CHAMPUS / TRICARE	17
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)   TOTAL GOVERNMENT DISCHARGES	56
	TOTAL DISCHARGES	3,328 4,506
	TOTAL DISCHARGES	4,300
В.	CASE MIX INDEX	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.95456
2	MEDICARE	1.37894
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.91871
4	MEDICAID	0.91643
5	OTHER MEDICAL ASSISTANCE	1.06624
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.94453 0.93178
	TOTAL GOVERNMENT CASE MIX INDEX	1.24051
	TOTAL CASE MIX INDEX	1.16575
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$72,963,986
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$36,836,135
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)  TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	P2C 427 054
<u>3</u>	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES  TOTAL ACTUAL DISCOUNT PERCENTAGE	\$36,127,851 49.51%
	TOTAL ACTUAL DIGCOUNT I ENGLIVIAGE	49.5176
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$49,956
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$27,028
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - <b>OHCA INPUT</b> )	\$0
Q	CHARITY CARE	\$3,573,641
<u>8</u> 9	BAD DEBTS	\$3,254,865
10	TOTAL UNCOMPENSATED CARE	\$6,828,506
	TOTAL STOCKED OTTE	\$0,020,000
11	TOTAL OTHER OPERATING REVENUE	\$5,761,698
12	TOTAL OPERATING EXPENSES	\$96,450,117
I		1

	WINDHAM COMMUNITY MEMORIAL HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2012	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
	DESCRIPTION	ACTUAL
LINE	DESCRIPTION	FY 2012
***	NET DEVENUE ODGES DEVENUE AND UNCOMPENSATED CARE DECONOU IATIONS	
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
	DECONCULATION OF OUCA DEFINED NET DEVENUE TO LICEDITAL AUDITED FIN STATEMENTS	
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	TOTAL ACCRUED PAYMENTS	\$86,905,515
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$86,905,515
	DI LIG//MINUO) OTLIED AD ILIOTAFNITO TO OLIOA DEFINED NET DEVENUE	<b>₾</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE  CALCULATED NET REVENUE	\$3,254,865 <b>\$90,160,380</b>
	CALCULATED NET REVENUE	\$90,100,360
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$90,160,381
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
<u> </u>	RESONALIZATION OF CHICA DEFINED CROSS REVENSE TO TIGOTHAE ASSISTED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$210,150,088
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$210,150,088
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$210,150,089
	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNOAL REPORTING)	\$210,130,009
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,000 E06
2	PLUS//MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$6,828,506 \$717.092
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$7,545,598
	,	, , , , , , , , , , , , , , , , , , , ,
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$7,545,598
	VADIANCE (MUST DE LESS THAN OR FOLIAL TO \$500)	**
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

3,254,865

\$6,828,506

\$1,281,624

2,203,210

3,343,672

\$6,828,506

154,491

\$771,595

\$56,118

339,857

375,620

\$771,595

5%

13%

5%

18%

13%

13%

3,100,374

\$6,056,911

\$1,225,506

1,863,353

2,968,052

\$6,056,911

2

3

4

5

6

Bad Debts (A)

**Total Uncompensated Care (A)** 

**Total Uncompensated Care (A)** 

Uncompensated Care - Inpatient Services

Uncompensated Care - Emergency Department

#### TWELVE MONTHS ACTUAL FILING WINDHAM COMMUNITY MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 **REPORT 650 - HOSPITAL UNCOMPENSATED CARE** (1) (2) (3) (4) (5) (6)ACTUAL **ACTUAL AMOUNT** % LINE DESCRIPTION FY 2011 FY 2012 DIFFERENCE DIFFERENCE Hospital Charity Care (from HRS Report 500) A. Number of Applicants 1,334 1,459 125 9% 2 Number of Approved Applicants 1,421 220 18% 1,201 **Total Charges (A)** \$2,956,537 \$617,104 21% 3 \$3,573,641 4 **Average Charges** \$2,515 \$53 2% \$2,462 Ratio of Cost to Charges (RCC) 5 0.465473 0.457643 (0.007830)-2% **Total Cost** \$1,376,188 \$1,635,452 \$259,264 19% 6 **Average Cost** 7 \$1,146 \$1,151 \$5 0% Charity Care - Inpatient Charges \$756,840 \$882,258 \$125,418 17% 8 196,040 Charity Care - Outpatient Charges (Excludes ED Charges) 9 1,089,823 1,285,863 18% 10 Charity Care - Emergency Department Charges 1,109,874 1,405,520 295,646 27% 11 **Total Charges (A)** \$2,956,537 \$3,573,641 \$617,104 21% Charity Care - Number of Patient Days 213 8% 12 197 16 13 Charity Care - Number of Discharges 67 72 5 7% 14 Charity Care - Number of Outpatient ED Visits 903 194 21% 1,097 15 Charity Care - Number of Outpatient Visits (Excludes ED Visits) 1,641 579 35% 2,220 Hospital Bad Debts (from HRS Report 500) В. **Bad Debts - Inpatient Services** \$468,666 \$399,366 (\$69,300)-15% Bad Debts - Outpatient Services (Excludes ED Bad Debts) 143,817 2 773,530 917,347 19% 3 Bad Debts - Emergency Department 1.858.178 1.938.152 79.974 4% 4 Total Bad Debts (A) \$3,100,374 \$3,254,865 \$154,491 5% Hospital Uncompensated Care (from HRS Report 500) C. Charity Care (A) 21% 1 \$2,956,537 \$3,573,641 \$617,104

(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.

Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)

		WINDHAM COMMUNITY MEMOR	RIAL HOSPITAL		
		TWELVE MONTHS ACTUA	L FILING		
		FISCAL YEAR 2	2012		
	REPORT 685 - HOSPITA	L NON-GOVERNMENT GROSS RE	EVENUE, CONTRACTUAL	ALLOWANCES,	
	A	CCRUED PAYMENTS AND DISCO	UNT PERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
( ' /	(-)	FY 2011	FY 2012	(0)	(0)
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
<u>LINE</u>	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$70,584,617	\$72,963,986	\$2,379,369	30
2	Total Contractual Allowances	\$35,260,270	\$36,127,851	\$867,581	20
	Total Accrued Payments (A)	\$35,324,347	\$36,836,135	\$1,511,788	49
	Total Discount Percentage	49.95%	49.51%	-0.44%	-19

7

Inpatient Gross Revenue per EPD

Inpatient Gross Revenue per ED

				COMMUNITY ME
	WINDHAM COMMUNITY MEMO			
	TWELVE MONTHS ACTU			
	FISCAL YEAR			
	REPORT 700 - STATISTICAL ANALYSIS OF HO	SPITAL REVENUE AND E	XPENSE	
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	DESCRIPTION	ACTUAL <u>FY 2010</u>	ACTUAL <u>FY 2011</u>	ACTUAL <u>FY 2012</u>
Α.	Gross and Net Revenue	070 404 700	2 200 545	* ***
1	Inpatient Gross Revenue	\$73,484,780	\$72,222,517	\$68,939,98
2	Outpatient Gross Revenue	\$120,470,784	\$127,160,608	\$141,210,10
3	Total Gross Patient Revenue	\$193,955,564	\$199,383,125	\$210,150,08
4	Net Patient Revenue	\$86,942,706	\$85,855,448	\$90,160,38
B.	Total Operating Expenses			
1	Total Operating Expense	\$91,501,818	\$92,639,489	\$96,450,11
C.	Utilization Statistics			
1	Patient Days	20,850	19,996	18,67
2	Discharges	5,100	4,701	4,50
3	Average Length of Stay	4.1	4.3	4.
4	Equivalent (Adjusted) Patient Days (EPD)	55,031	55,203	56,92
0	Equivalent (Adjusted) Discharges (ED)	13,461	12,978	13,73
D.	Case Mix Statistics			
1	Case Mix Index	1.03668	1.10184	1.1657
2	Case Mix Adjusted Patient Days (CMAPD)	21,615	22,032	21,76
3	Case Mix Adjusted Discharges (CMAD)	5,287	5,180	5,25
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	57,050	60,825	66,35
5	Case Mix Adjusted Equivalent Discharges (CMAED)	13,955	14,300	16,01
E.	Gross Revenue Per Statistic			
1	Total Gross Revenue per Patient Day	\$9,302	\$9,971	\$11,25
2	Total Gross Revenue per Discharge	\$38,031	\$42,413	\$46,63
3	Total Gross Revenue per EPD	\$3,524	\$3,612	\$3,69
4	Total Gross Revenue per ED	\$14,409	\$15,363	\$15,30
5	Total Gross Revenue per CMAEPD	\$3,400	\$3,278	\$3,16
6	Total Gross Revenue per CMAED	\$13,899	\$13,943	\$13,12

\$1,335

\$5,459

\$1,308

\$5,565

\$1,211

\$5,019

#### OFFICE OF HEALTH CARE ACCESS TWELVE MONTHS ACTUAL FILING WINDHAM COMMUNITY MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2012** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (4) (5) (3) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2010 FY 2011 FY 2012 **Net Revenue Per Statistic** F. Net Patient Revenue per Patient Day \$4,170 \$4,294 \$4,828 2 Net Patient Revenue per Discharge \$17,048 \$18,263 \$20,009 3 Net Patient Revenue per EPD \$1,580 \$1,555 \$1,584 Net Patient Revenue per ED \$6,459 \$6,615 \$6,564 4 5 Net Patient Revenue per CMAEPD \$1,524 \$1,412 \$1,359 Net Patient Revenue per CMAED \$6,230 \$6,004 \$5,631 G. Operating Expense Per Statistic \$4,389 Total Operating Expense per Patient Day \$4,633 \$5,165 1 \$17,942 \$19,706 \$21,405 2 Total Operating Expense per Discharge \$1,663 3 Total Operating Expense per EPD \$1,678 \$1,694 Total Operating Expense per ED \$6,798 \$7,138 \$7,022 4 Total Operating Expense per CMAEPD \$1,604 \$1,523 \$1,454 5 Total Operating Expense per CMAED \$6,557 \$6,478 \$6,023 6 H. Nursing Salary and Fringe Benefits Expense Nursing Salary Expense \$12,409,863 \$12,572,579 \$13,759,500 1 2 Nursing Fringe Benefits Expense \$4,602,323 \$4,891,166 \$4,918,084 \$17,463,745 \$18,677,584 Total Nursing Salary and Fringe Benefits Expense \$17,012,186 I. Physician Salary and Fringe Expense 1 Physician Salary Expense \$887,642 \$2,054,798 \$2,572,919 Physician Fringe Benefits Expense \$329,191 \$799,387 \$919,643 2 Total Physician Salary and Fringe Benefits Expense \$1,216,833 \$2,854,185 \$3,492,562 3

Non-Nursing, Non-Physician Salary and Fringe Benefits Expense

Non-Nursing, Non-Physician Salary Expense

**Total Salary and Fringe Benefits Expense** 

Total Salary and Fringe Benefits Expense

Total Salary Expense

Total Fringe Benefits Expense

Non-Nursing, Non-Physician Fringe Benefits Expense

Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense

J.

1 2

K.

1

2

\$26,003,628

\$9,643,709

\$35.647.337

\$39,301,133

\$14,575,223

\$53,876,356

\$26,718,419

\$10,394,386

\$37.112.805

\$41,345,796

\$16,084,939

\$57,430,735

\$26,574,906

\$9,498,719

\$36.073.625

\$42,907,325

\$15,336,446

\$58,243,771

2

3

4

5

Total Salary and Fringe Benefits Expense per Discharge

Total Salary and Fringe Benefits Expense per CMAEPD

Total Salary and Fringe Benefits Expense per CMAED

Total Salary and Fringe Benefits Expense per EPD

Total Salary and Fringe Benefits Expense per ED

#### WINDHAM COMMUNITY MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2012** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (1) (2) (4) (3) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2010 FY 2011 FY 2012 Total Full Time Equivalent Employees (FTEs) L. Total Nursing FTEs 215.4 208.6 179.4 1 2 Total Physician FTEs 4.5 9.3 11.4 3 Total Non-Nursing, Non-Physician FTEs 383.5 389.6 410.8 607.5 601.6 Total Full Time Equivalent Employees (FTEs) 603.4 Μ. Nursing Salaries and Fringe Benefits Expense per FTE 1 Nursing Salary Expense per FTE \$57,613 \$60,271 \$76,697 Nursing Fringe Benefits Expense per FTE \$21,366 \$23,448 \$27,414 2 3 Total Nursing Salary and Fringe Benefits Expense per FTE \$78,980 \$83,719 \$104,111 N. Physician Salary and Fringe Expense per FTE Physician Salary Expense per FTE \$197,254 \$220,946 \$225,695 1 \$80,670 Physician Fringe Benefits Expense per FTE \$85,956 2 \$73,154 Total Physician Salary and Fringe Benefits Expense per FTE \$270,407 \$306,902 \$306,365 3 Ο. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE Non-Nursing, Non-Physician Salary Expense per FTE \$67,806 \$68,579 \$64,691 1 Non-Nursing, Non-Physician Fringe Benefits Expense per FTE \$25,147 \$26,680 \$23,122 2 Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE \$87,813 3 \$92,953 \$95,259 P. Total Salary and Fringe Benefits Expense per FTE Total Salary Expense per FTE \$65,133 \$68,059 \$71,322 1 Total Fringe Benefits Expense per FTE \$24,155 \$26,477 \$25,493 2 Total Salary and Fringe Benefits Expense per FTE \$89,288 \$94,536 \$96,815 3 Total Salary and Fringe Ben. Expense per Statistic Total Salary and Fringe Benefits Expense per Patient Day \$2,584 \$2,872 \$3,119 \$12,217 \$12,926

\$10,564

\$979

\$4,002

\$944

\$3,861

\$1,040

\$4,425

\$944

\$4,016

\$1,023

\$4,240

\$878

\$3,637